

DVT Prophylaxis Guidelines

Patient Type	Risk Assessment	Recommended DVT Prophylaxis
General Surgery Patients	Low	Early ambulation
	Moderate	Heparin 5000units subcutaneously Q 8 hrs *
		Enoxaparin 40mg subcutaneously daily (30mg if CrCl ≤ 30ml/min) ●
	High	Enoxaparin 40mg subcutaneously daily (30mg if CrCl ≤ 30ml/min) AND pneumatic comp. device ●
Heparin 5000units subcutaneously Q 8 hrs * AND pneumatic compression device		
Orthopedic Patients	High	Enoxaparin 40mg subcutaneously daily (30mg if CrCl ≤ 30ml/min) for HIP surgery or fracture ●
		Enoxaparin 30mg subcutaneously Q12 hrs (30mg if CrCl ≤ 30ml/min) for Knee replacement ●
		Warfarin at 1800 hrs daily and adjusted to INR 2-3 (as an alternative to enoxaparin in both hip or knee surgeries) ∞
		Pneumatic compression device (for use in addition to one of the above, not as a stand alone)
Neurosurgery	Moderate	Enoxaparin 30mg subcutaneously Q12 hrs (30mg if CrCl ≤ 30ml/min) if bleeding risk acceptable ●
	High	Enoxaparin 30mg subcutaneously Q12 hrs (30mg if CrCl ≤ 30ml/min) AND pneumatic comp. device ●
Gynecologic Surgery	Moderate	Heparin 5000units subcutaneously Q 8 hrs *
		Enoxaparin 40mg subcutaneously daily (30mg if CrCl ≤ 30ml/min) ●
		Pneumatic compression device
	High	Heparin 5,000units subcutaneously Q 8 hrs * AND pneumatic compression device
Medical Patients	Low	Early ambulation
	Moderate	Heparin 5,000units subcutaneously Q 8 hrs *
		Enoxaparin 40mg subcutaneously daily (30mg if CrCl ≤ 30ml/min) ●
	High	Enoxaparin 40mg subcutaneously daily (30mg if CrCl ≤ 30ml/min) AND pneumatic comp. device ●

* Hold am dose on day epidural catheter is pulled

- Do not start until 4 hrs after epidural catheter is discontinued
- ∞ Epidural catheter to be removed before INR >1.5

Deep Vein Thrombosis Risk Factor Assessment

Risk Factors worth 1 point	Risk Factors worth 2 points	Risk Factors worth 3 point
<input type="checkbox"/> Age 41-60 years	<input type="checkbox"/> Age 61-70 years	<input type="checkbox"/> Age over 70 years
<input type="checkbox"/> Prior history of postoperative DVT	<input type="checkbox"/> Prior history idiopathic DVT	<input type="checkbox"/> Prior history of PE
<input type="checkbox"/> Family history of DVT or PE	<input type="checkbox"/> Major surgery	<input type="checkbox"/> Anticardiolipin Ab syndrome
<input type="checkbox"/> Leg swelling, ulcers. Stasis, varicose veins	<input type="checkbox"/> Malignancy	<input type="checkbox"/> Protein C or S deficiency
<input type="checkbox"/> CHF or MI	<input type="checkbox"/> Multiple trauma	<input type="checkbox"/> Antithrombin deficiency
<input type="checkbox"/> Stroke with paralysis	<input type="checkbox"/> Spinal cord injury with paralysis	<input type="checkbox"/> Myeloproliferative disorders
<input type="checkbox"/> Inflammatory bowel disease		
<input type="checkbox"/> Central line		
<input type="checkbox"/> Immobilization > 12 hours, bed confinement		
<input type="checkbox"/> General anesthesia time > 2 hours		
<input type="checkbox"/> Pregnancy or < 1 month postpartum		
<input type="checkbox"/> Obesity (> 20% over IBW)		
<input type="checkbox"/> Hyperviscosity syndrome		
<input type="checkbox"/> Current estrogen therapy		

Total Risk Factor Score	Risk Group
0	Low
1-2	Moderate
≥ 3	High