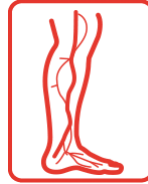


In hospital, what will be done to reduce my VTE risk?

If you are having an operation, ask your anaesthetist to consider which type of anaesthesia is most appropriate for you.

Anti-embolism stockings – Should be worn from admission until you return to your normal level of mobility.



Some patients may be prescribed a course of **anticoagulant injections**, for example, patients who have had a surgery, for the course of injections to be completed at home. If you have been prescribed anticoagulant injections at home and you need help with administration, please ask your Dr, Nurse or Pharmacist before discharge.



The clinical team may ask you to wear a **calf or foot pump**, a special inflatable sleeve or cuff around your legs while you are in bed or sitting still in a chair. This will inflate automatically and provide pressure at regular intervals, increasing blood flow out of your legs.

After discharge from hospital

Anti-embolism stockings should be worn from admission until you return to your usual level of mobility. If you have been advised to continue anticoagulation medicine at home and you need help with administration of injections or tablets, please ask your nurse before discharge.

If you develop any signs or symptoms of VTE at home, then seek medical advice immediately, either from your GP or nearest hospital A&E.



Keep moving or walking; leg exercises are valuable; drink plenty of fluid to keep hydrated (unless you have been advised against these by your doctor due to other medical conditions).

Preventing Venous Thromboembolism (VTE) & Hospital Associated Blood Clots

A guide for patients at East Lancashire Hospitals NHS Trust



Who should read this patient guide?

This has been written for people being admitted or have been in hospital. It is intended to help you understand venous blood clots (called venous thromboembolism or VTE for short), which can form in your body after illness or surgery.

After reading this guide, you may wish to discuss VTE with your doctor and ask about the best way to reduce the likelihood of VTE.

What is VTE?

VTE is the name given to **deep vein thrombosis** (called DVT for short) or a pulmonary embolism (called PE for short). A DVT is a thrombus (blood clot) that forms in a deep vein, most commonly in your leg or pelvis and can cause swelling and pain or discolouration of the leg- red, purple or blue changes.

If a clot becomes dislodged and passes through your circulation and reaches your lungs, this is called a PE and can cause coughing (with blood stained phlegm), chest pain and breathlessness or collapse. VTE diagnosis requires immediate treatment. If you develop any of these symptoms either in hospital or after discharge, **seek medical advice Immediately**.

Is VTE common?

VTE occurs in the general population in about one in 1000 people.

You will have heard in the news about DVT in people flying for long periods, but you are actually much more likely to get VTE if you are going into hospital because of illness or for surgery.



Who is at risk of VTE?

In addition to admission to hospital, there are other factors which place you at greater risk of VTE.

These include:-

- > a previous VTE
- > a recent diagnosis of cancer
- > certain blood conditions/clotting disorders (Antiphospholipid syndrome or factor V Leiden)
- > use of certain contraceptive and hormone replacement tablets
- > being overweight (Body mass index more than 30)
- > not being able to move about
- > being older than 60
- > suffering a significant injury or trauma
- > being pregnant
- > after giving birth
- > dehydration
- > smoking
- > varicose veins etc.



What is Hospital Associated VTE (blood clot)?

Happens in patients when they are in hospital, and up to 90 days after they leave hospital.

Although the risks are small, the consequences can be serious.

In the longer term, blood clots can cause painful, long-term swelling and ulcers. They can even lead to death.



Reduce your risk

In hospital:

- > Keep moving or walking and get out of bed as soon as you can after your operation.
- > Ask to see a physiotherapist to learn leg exercises
- > Ask your doctor or nurse: 'What is being done to reduce my risk of VTE?'
- > Drink plenty of fluid to keep hydrated.



Outside hospital

If your hospital admission has been planned several weeks in advance, there are precautions you can take to reduce your risk of VTE:

- > Talk to your doctor about your temporarily stopping or changing your contraceptive or hormone replacement tablets.
- > Keep a healthy weight and do regular exercise.
- > Stop smoking.

Will my VTE risk be assessed?

Your individual risk for VTE will be assessed by your clinical team. If you are at risk, your doctor or nurse will discuss with you what can be done to reduce your risk and will follow national guidelines and offer you protection against VTE.

