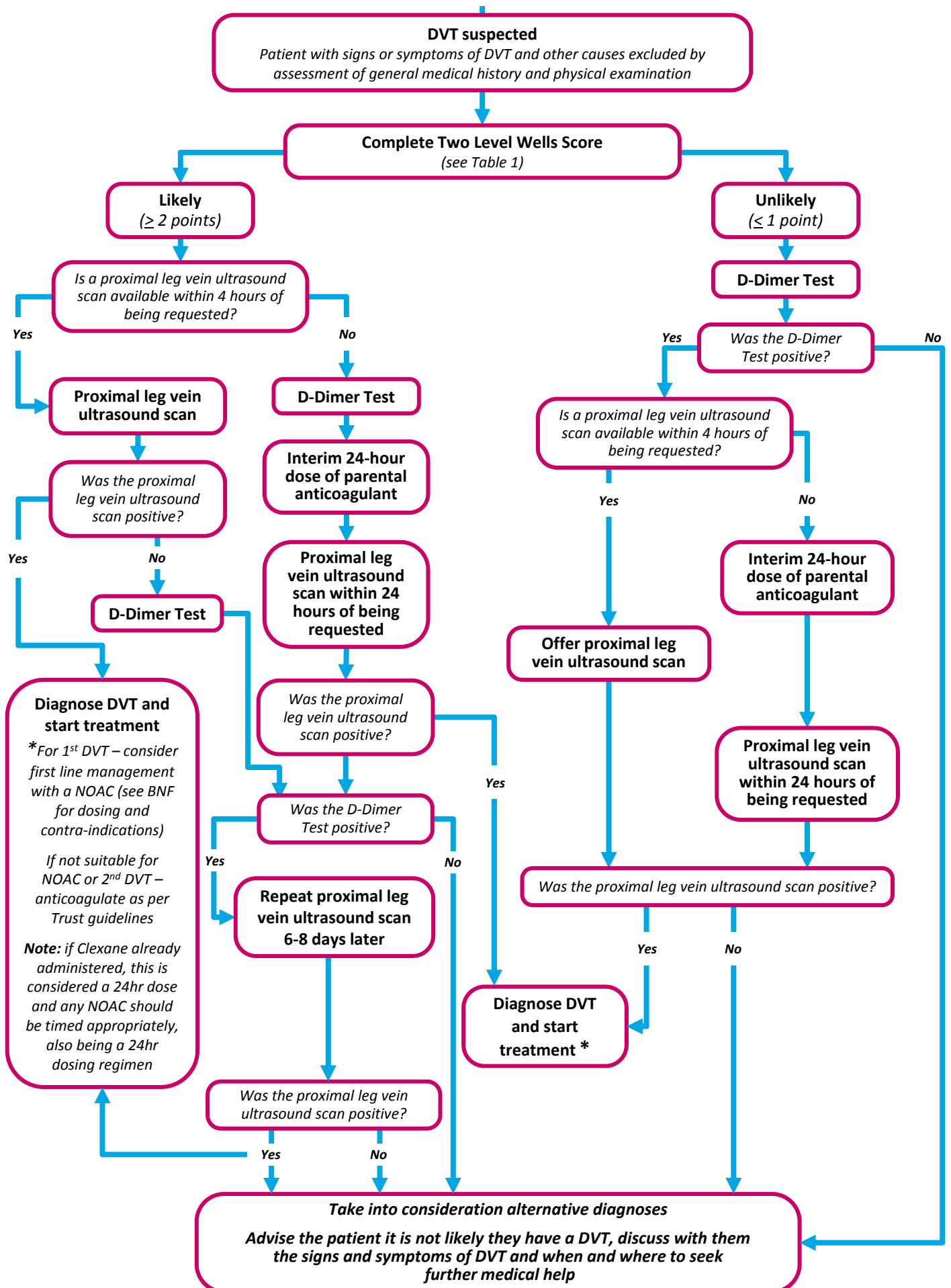


SUSPECTED DEEP VEIN THROMBOSIS (DVT) PATHWAY

All patients referred to Ambulatory Emergency Care must meet the generic suitability criteria (see reverse)



Ambulatory Emergency Care Generic Suitability Criteria

Please bear in mind the ethos of Ambulatory Emergency Care when considering patient referral.

Patients must be safe, willing and able to leave the hospital, be cared for at home (by themselves or relatives etc.) and return frequently for further investigations and treatment as their condition requires.

Does your patient meet the following criteria?

Is the patient mobile and able to return to the hospital for further investigation and treatment as required?

Does the patient have someone at home who could call for help if needed?

Does the patient have a telephone and are they able to use it in case of emergency?

Is the patient likely to comply with recommended treatment and investigations?

Is your patient clinically stable? (not hypoxic or haemodynamically compromised)

TWO LEVEL DVT WELLS SCORE - Table 1	
Clinical Feature	Points
Active cancer (treatment on-going, within 6 months or palliative)	1
Paralysis, paresis or recent plaster immobilisation of the lower extremities	1
Recently bedridden > 3 days or major surgery within 12 weeks requiring general or regional anaesthesia	1
Localised tenderness along the distribution of the deep venous system	1
Entire leg swollen	1
Calf swelling – 3cm larger than asymptomatic side	1
Pitting oedema confined to the symptomatic leg	1
Collateral superficial veins (non-varicose)	1
Previously documented DVT	1
Alternate diagnosis at least as likely as DVT	-2
Clinical probability simplified score	
DVT <i>likely</i>	2 points or more
DVT <i>unlikely</i>	1 point or less

Duration of Therapy

- For patients with active cancer who have a confirmed DVT or PE, treatment should be with LMWH only and therapy should be continued for 6 months.
- For patients with a provoked DVT or PE, for whom the provoking factor has been removed, therapy should be continued for three months.

PATIENT INFORMATION SHEET

For patients with PE and/or DVT on anticoagulant (blood thinning) medications

You have either a suspected or confirmed clot in your leg. After a careful medical assessment your doctors in the hospital have decided to carry out further investigation and treatment of this condition as an out-patient. This has been considered to be safe in your case. Please remember that a clot is a potentially serious condition and it must be investigated and treated appropriately.

If you begin to feel unwell at home, suffer any chest pains, shortness of breath, dizziness or fainting or are concerned in any way, please attend the Emergency Department and bring this letter with you.

Key points to remember

If you take your medication as instructed, it is unlikely that you will have any problems. However you can give your treatment the best chance of success by following these guidelines:

- Take your medication and go for your blood tests when you are told to. Try to take your medicine at the same time each day—teatime or in the evening is often a good time.
- Carry your anticoagulation therapy record booklet with you in case of an emergency.
- Tell your healthcare team about all other medicines you may be taking—including vitamins and other supplements you have bought from health-food shops.
- Remember to tell your healthcare team if you think you have taken too much medication, or have missed a dose.
- If you go for any other treatment, for example from another doctor or dentist or pharmacist tell them you are taking an anticoagulant.
- Do not take any new medicines including those you buy over the counter without checking with your GP or pharmacist first.
- Tell your GP team if you are pregnant or are planning to become so.
- Limit the amount of alcohol you drink to no more than one or two drinks a day, and never go on a binge!
- Don't make big changes to your diet without talking to your GP first.
- If you do suffer a cut, press on it with a clean cloth for at least 5 minutes and elevate the area if possible. If the bleeding does not stop, contact your GP immediately.
- Take gentle exercise as much as possible, for example walking, swimming, cycling.
- Avoid standing for long periods—keep moving if you cannot sit.
- Put your feet up when sitting in a chair—your legs should be supported higher than the seat of the chair if possible.
- Take particular care when brushing your teeth or shaving—consider using a soft toothbrush and electric shaver.
- Always wear shoes or slippers and make sure you have strong gloves on when gardening.