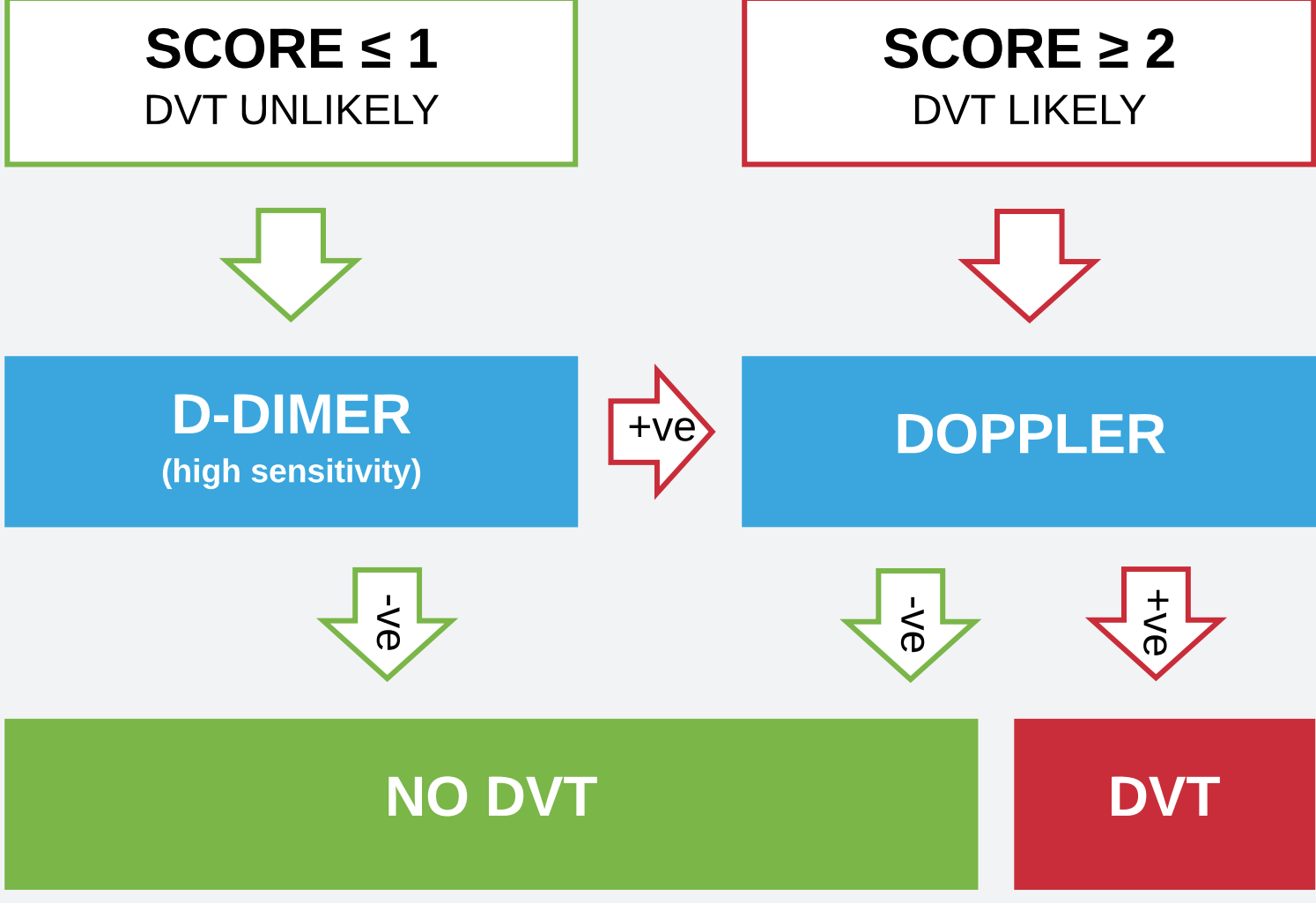


Always follow local guidelines and discuss with Senior / Haematology if unsure

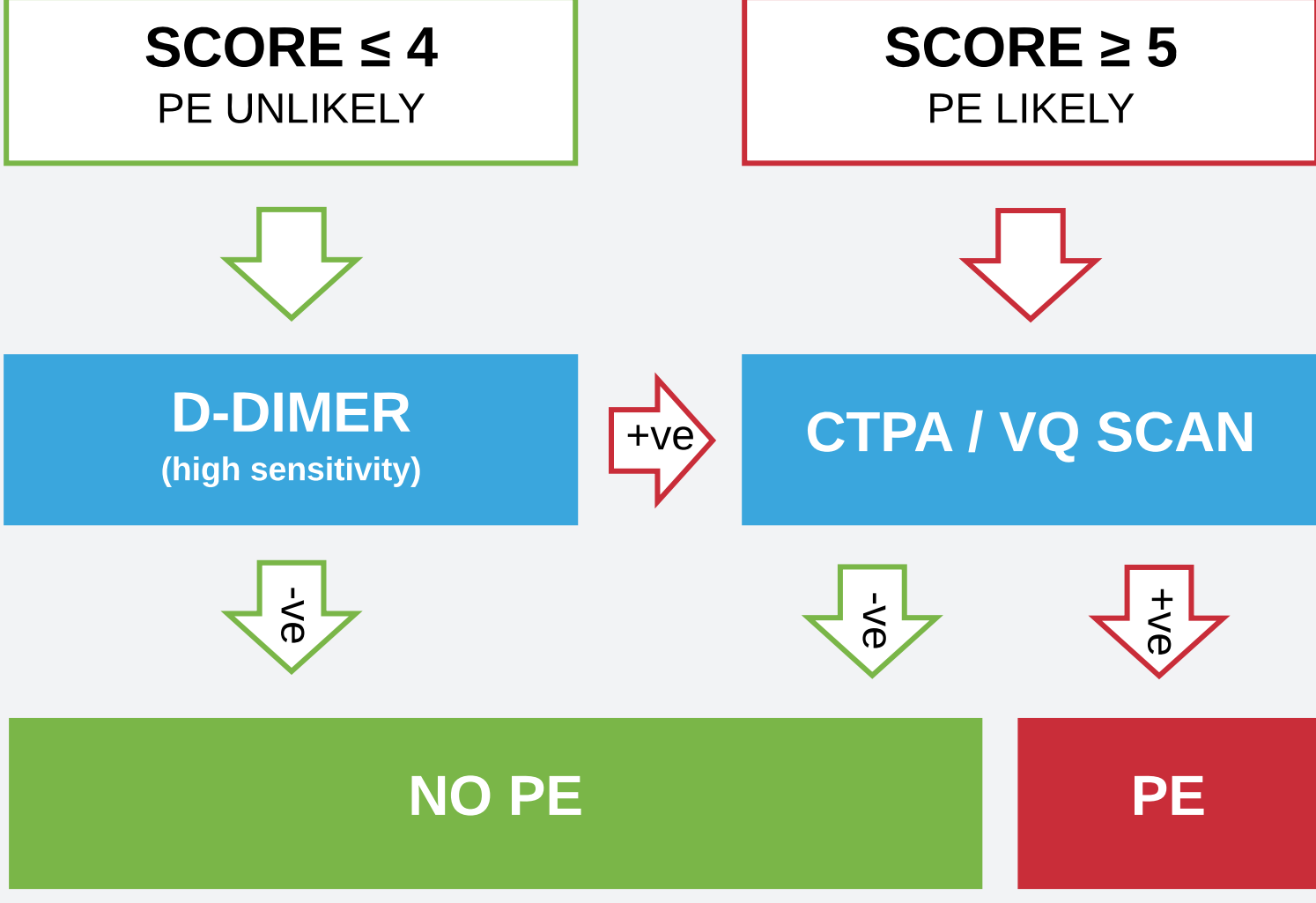
DVT ASSESSMENT

WELLS DVT RISK SCORE



PE ASSESSMENT

WELLS PE RISK SCORE



D-DIMER LIMITATIONS

- D-DIMER: False +ve**
Can be falsely raised due to various reasons: liver disease, inflammation, malignancy, trauma (surgery), pregnancy, age
- D-DIMER: Age adjustment**
 ≤ 50 years age: +ve $> 500 \mu\text{g/L}$
 > 50 years age: +ve $> \text{age (years)} \times 10 \mu\text{g/L}$

SUSPECTED DVT / PE MANAGEMENT

- Discuss with Senior if signs of right heart strain / high oxygen requirement or haemodynamically unstable
- Scan < 4 hours:**
- Consider* waiting for result before starting treatment
- Scan > 4 hours:**
- High clinical suspicion of DVT/PE:
 - Start treatment dose LMWH as per local guidelines
 - Low clinical suspicion of DVT/PE:
 - Consider* waiting for result before starting treatment
- *Always follow local guidelines in regard to starting LMWH

CONFIRMED DVT / PE MANAGEMENT

See local prescribing guidelines / discuss with Senior for medication choice and duration

GENERAL GUIDELINES	
MEDICATION	DURATION
<ul style="list-style-type: none">WarfarinNOAC	3 months <ul style="list-style-type: none">'Provoked' DVT / PE in a patient with no risk factors
	6 months / or longer: <ul style="list-style-type: none">'Unprovoked' DVT / PE or patient with risk factors (obesity / cancer / previous)

Always consult BNF for dose / administration and contraindications for all above medications