



DVT

Risk Assessment Form¹

Department: TICU

Date: 5/10/2024

Patient's Identification No.:

Sex: M F

Height: 175

Weight (kg): 67.5

Age:

Choose all that apply

A

Each Risk Factor Represents 1 Point

- Age 41-60 years
 - Minor surgery planned
 - History of prior major surgery
 - Varicose veins
 - History of inflammatory bowel disease
 - Swollen legs (current)
 - Obesity (BMI > 30)
 - Acute myocardial infarction (< 1 month)
- Congestive heart failure (< 1 month)
 - Sepsis (< 1 month)
 - Serious lung disease incl. pneumonia (< 1 month)
 - Abnormal pulmonary function (COPD)
 - Medical patient currently at bed rest
 - Leg plaster cast or brace
 - Other risk factors

B

Each Risk Factor Represents 2 Points

- Age 60-74 years
- Major surgery (> 60 minutes)
- Arthroscopic surgery (> 60 minutes)
- Laparoscopic surgery (> 60 minutes)
- Previous malignancy
- Central venous access
- Morbid obesity (BMI > 40)

Total Tickmarks 13 X

Total Score A 13

Total Tickmarks 0 X/2

Total Score B 0

C

Each Risk Factor Represents 3 Points

- Age over 75 years
 - Major surgery lasting 2-3 hours
 - BMI > 50 (venous stasis syndrome)
 - History of SVT, DVT/PE
 - Family history of DVT/PE
- Present cancer or chemotherapy
 - Positive Factor V Leiden
 - Positive Prothrombin 20210A
 - Elevated serum homocysteine
 - Positive Lupus anticoagulant

- Elevated anticardiolipin antibodies
 - Heparin-Induced thrombocytopenia (HIT)
 - Other thrombophilia
 - Type _____

D

Each Risk Factor Represents 5 Points

- Elective major lower extremity arthroplasty
 - Hip, pelvis or leg fracture (< 1 month)
 - Stroke (< 1 month)
- Multiple trauma (< 1 month)
 - Acute spinal cord injury (paralysis) (< 1 month)
 - Major surgery lasting over 3 hours

E

For Women Only (Each Represents 1 Point)

- Oral contraceptives or hormone replacement therapy
- Pregnancy or postpartum (< 1 month)
- History of unexplained stillborn infant, recurrent spontaneous abortion (≥ 3), premature birth with toxemia or growth-restricted infant

Total Score (A+B+C+D+E)= 13

RISK ASSESSMENT: Highest High Moderate Low

Recommended Prophylactic Regimens for Each Risk Group

Total Score	Incidence of DVT	Risk Category	Recommended Regimen
1	< 10%	Low	No Specific measures <input type="checkbox"/> LDUFH (every 12h), LMWH, IPC and GCS <input type="checkbox"/>
2	10-20%	Moderate	LDUFH (every 8h), LMWH, and IPC <input type="checkbox"/>
3-4	20-40%	High	LMWH, Oral anticoagulants, Adjusted dose heparin <input type="checkbox"/>
5 or more	40-80% 1-5% mortality	Highest	GCS (+ LDUFH or LMWH) <input type="checkbox"/> IPC (+ LDUFH or LMWH) <input type="checkbox"/> GCS (+ LDUFH or LMWH) <input type="checkbox"/>

LDUFH-Low Dose Unfractionated Heparin

LMWH-Low Molecular Weight Heparin

GCS-Graduated Compression Stockings

IPC-Intermittent Pneumatic Compression

Reasons for not giving Prophylaxis

1. Adapted from Caprini JA. Dis Mon. 2005 Feb-Mar;51(2-3):70-8.
2. Chest 2006;132:3818-4638.

Thromboprophylaxis is the Number 1 strategy to improve patient safety²