

SAUNDERS MEDICAL CENTER
PHYSICIANS ORDER SET
VTE PROPHYLAXIS

Date/Time:

<input type="checkbox"/> LOW RISK * <i>already on coumadin</i> * < age 50 * Minor Surgery (< 45min)	<input type="checkbox"/> Early ambulation: In Halls, QID 50 feet or greater <input type="checkbox"/> Education
<input type="checkbox"/> MODERATE RISK * > age 51 * Pneumonia/Respiratory Failure * Smoking/COPD * Active Inflammation * CHF * Hx of MI * Dehydration * Varicose Veins, Ulcers, Stasis * Obese * Non-ambulatory/Restricted Mobility * Active Malignancy * Hormone Replacement Therapy, Oral contraceptives, Evista or Tamoxifen * Major surgery (> 45 min in last 30 days) * PICC – Central Line	<input type="checkbox"/> Enoxaparin (Lovenox) 40mg SC q day <input type="checkbox"/> Education <p style="text-align: center;">PLUS:</p> <input type="checkbox"/> Intermittent pneumatic compression devices (SCDs) <i>or</i> <input type="checkbox"/> Compression Stockings (TEDS alone are not therapeutic): <input type="checkbox"/> Knee High <input type="checkbox"/> Thigh High <p style="text-align: center;">OR:</p> <input type="checkbox"/> No pharmacologic or mechanical prophylaxis due to contraindication of _____
<input type="checkbox"/> HIGHEST RISK * > age 74 * Hip or Knee Arthroplasty * Acute SCI with Paresis * Multiple/Major trauma * Abdominal or Pelvic Surgery for Cancer * HX of DVT/PE * Ischemic Stroke * Hip, Pelvic or Leg FX (last 30 days)	<input type="checkbox"/> Enoxaparin (Lovenox) 40mg SC q day <input type="checkbox"/> Education <p style="text-align: center;">PLUS:</p> <input type="checkbox"/> Intermittent pneumatic compression devices (SCDs) <i>or</i> <input type="checkbox"/> Compression Stockings (TEDS alone are not therapeutic): <input type="checkbox"/> Knee High <input type="checkbox"/> Thigh High <p style="text-align: center;">OR:</p> <input type="checkbox"/> No pharmacologic or mechanical prophylaxis due to contraindication of _____
LAB : <input type="checkbox"/> Every other day INR if taking Warfarin (Coumadin) <input type="checkbox"/> If patient on Lovenox draw a Baseline CBC auto diff and BMP <i>if not already done</i> <input type="checkbox"/> Pharmacist will adjust dose of Lovenox if CrCl < 30 ml/min	

MD Signature: _____ **Date/Time:** _____

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Contraindications to Pharmacologic Prophylaxis

Relative	Absolute
<ul style="list-style-type: none">❖ History cerebral hemorrhage❖ Craniotomy within 2 weeks❖ Platelet count < normal but > 20,000/mm³❖ Brain metastases❖ Active intracranial device/neoplasm/lesion❖ Intraocular surgery (< 2 wks)❖ GI/GU bleed within 6 months❖ Severe hypertension (SBP > 200, DBP > 120)❖ Thrombocytopenia❖ Heparin induced thrombocytopenia (use Arixtra 2.5 mg daily)❖ Coagulopathy (PT>18 sec)❖ Proliferative retinopathy❖ Platelets <100,000❖ Renal insufficiency❖ Pork allergy Use Arixtra 2.5 mg daily	<ul style="list-style-type: none">❖ Active hemorrhage❖ Platelet count 20,000/mm³ or less❖ Warfarin use in 1st trimester pregnancy❖ Severe head, spinal cord, or extremity trauma w/ hemorrhage within 4 weeks❖ Epidural/indwelling spinal catheter❖ CrCl < 10 ml/min