

STATE TRAUMA ADVISORY BOARD MANAGEMENT RECOMMENDATIONS

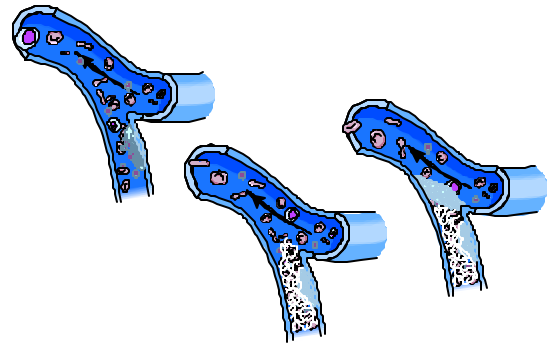
SUBJECT: DVT PROPHYLAXIS AND THERAPEUTIC INTERVENTION

These recommendations represent a suggested treatment method based on a review of the literature and expert opinion reflecting the clinical experience of members of the STAB. The literature review was not performed according to a formal evidence-based medicine process and would therefore be classified as Class III evidence. These recommendations represent a treatment approach without proven superiority over other treatment methods. Their employment is at the discretion of the managing physician.

PURPOSE: Trauma patients are at high risk for venous thromboembolism if they do not receive adequate prophylaxis. The fact that DVT (Deep Vein Thrombosis) and PE (Pulmonary Embolism) occur following trauma is well established. The optimal mode of prophylaxis is yet to be determined in the literature. This protocol is to establish a common pathway to assure trauma patient DVT prophylaxis

RESPONSIBLE PARTIES:

Trauma Surgeon
Radiologist
Nursing Staff



I. POLICY

See attached algorithm for DVT prophylaxis

See attached algorithm for VTE (Venous Thrombo Embolism) therapy

See RAP (Risk Assessment Profile) calculation table

Attachments:

Algorithm for DVT prophylaxis and VTE therapy

RAP scale

REFERENCES:

EAST Trauma Practice Guideline. www.east.org , 1998.

Geerts WH, Jay RM, Code KI, et.al. A Comparison of Low Dose Heparin with Low-Molecular-Weight Heparin Against Venous Thromboembolism After Major Trauma. NEJM 335: 1996, 701-707.

Meyer CS, Blebea J, Davis K, et. al. Surveillance Venous Scans for Deep Vein Thrombosis in Multiple Trauma Patients. Annals of Vascular Surgery 9(1): 109-14, 1995

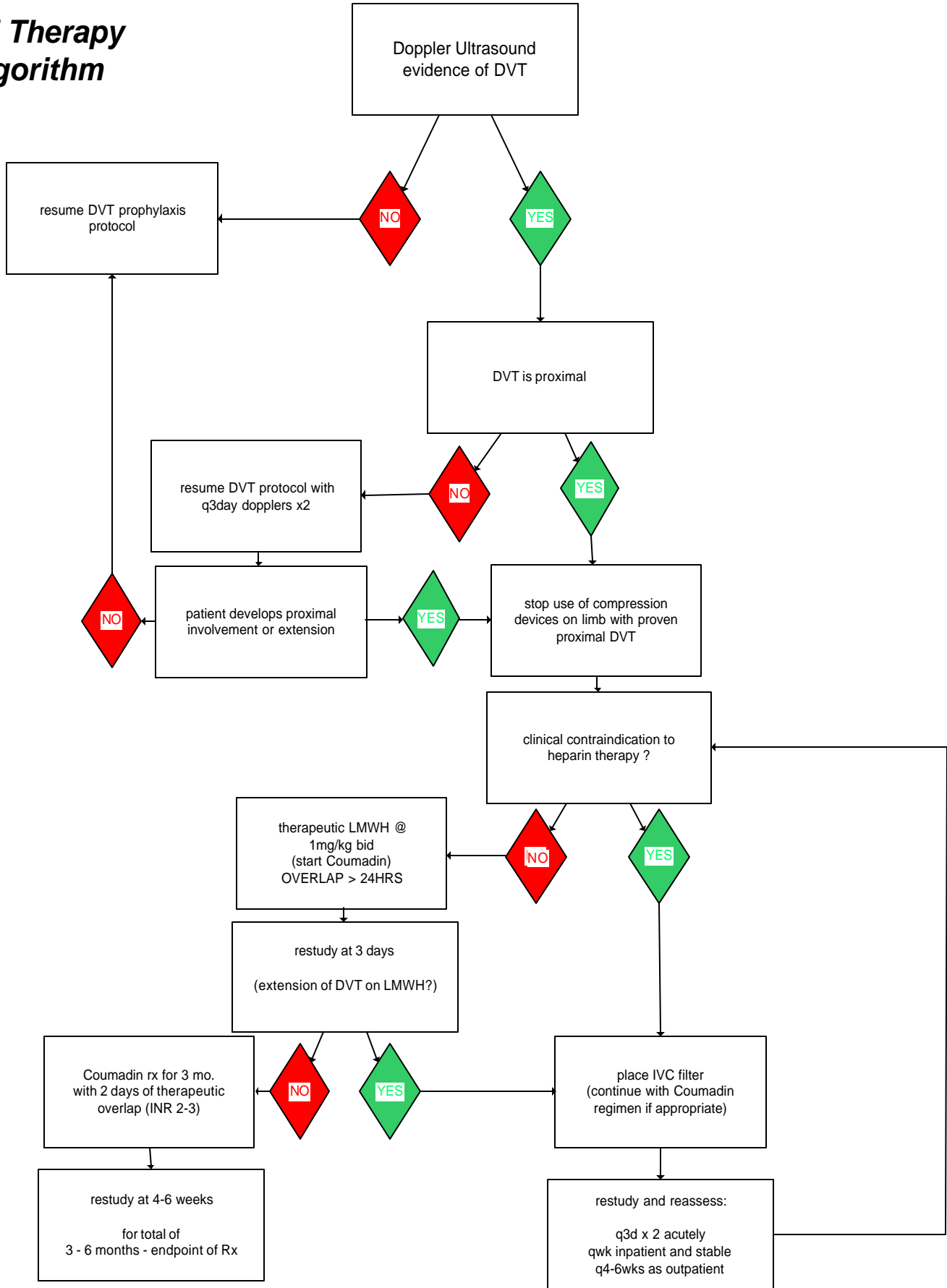
Pearson SC, Polak JK, Cartwright S, et.al. A Critical Pathway to Evaluate Suspected Deep Vein Thrombosis. Archives of Internal Med 155(16): 1773-8, 1995.

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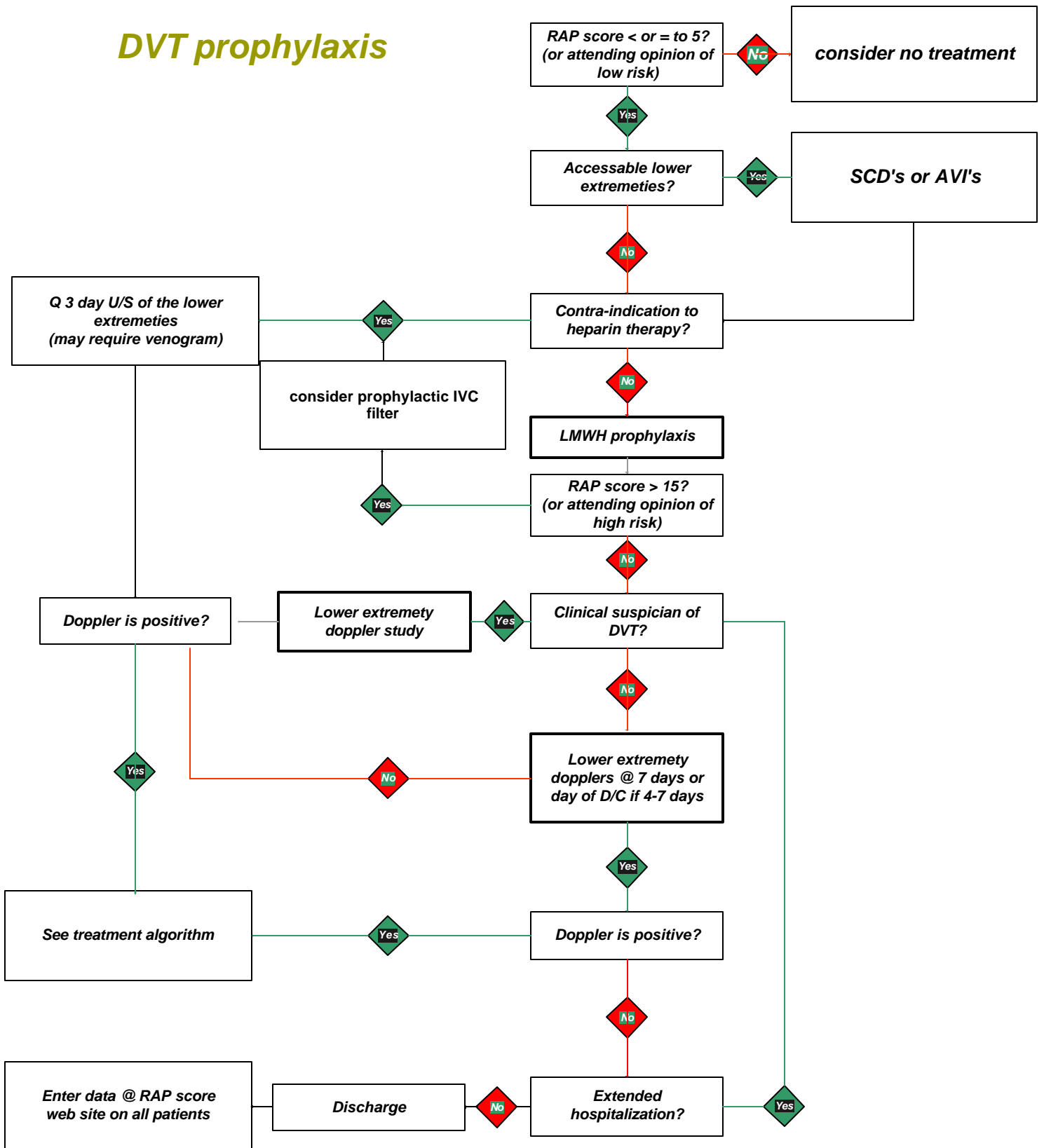
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Eastern Association for the Surgery of Trauma (EAST)

VTE Therapy Algorithm



DVT prophylaxis



RISK ASSESSMENT PROFILE

<u>Underlying Conditions</u>	Weight
Obesity (>120% Metropolitan Life Table)	2
Malignancy	2
Abnormal coagulation factors at admission	2
History of thromboembolism	3
 <u>Iatrogenic Factors</u>	
Central femoral Line >24 hours	2
Four or more transfusions during 1 st 24 hours	2
Surgical procedures >2 hours	2
Repair or ligation of major vascular injury	3
 <u>Injury Related Factors</u>	
AIS* >2 for the Chest	2
AIS* >2 for the Abdomen	2
Spinal fractures	2
AIS* >2 for the head	3
Coma (GCS <8 for >4 hours)	3
Complex lower extremity fracture	4
Pelvic fracture	4
Spinal cord injury with para or quadriplegia	4
 <u>Age</u>	
≥40 but <60	2
≥60 but <75	3
≥75	4