

**Local Guideline for ENT/Oral Maxillo Facial Surgery
Adult Risk Assessment for Venous Thromboembolism (VTE)**

- Risk Assessment must be completed for all patients within 24 hours of Admission to hospital
- Patients must be reassessed every 72 hours or sooner if condition changes
- Reassessment must be documented in Kardex
- Please complete risk assessment and then sign and date box at bottom of page.

Patient Addressograph

RISK FACTORS—Please tick all pertinent factors

Note: Each Risk Factor has a value of 1 unless otherwise indicated

Age 41-60	<input type="checkbox"/>	Operation > 30 mins (2 Factors)	<input type="checkbox"/>
Age >60 (2 Factors)	<input type="checkbox"/>	Operation > 4 hours (4 Factors)	<input type="checkbox"/>
Obesity (>30kg/m ²)	<input type="checkbox"/>	Free flap (4 Factors)	<input type="checkbox"/>
Current Malignancy	<input type="checkbox"/>	Anticipated bed rest >24 hrs (3 Factors)	<input type="checkbox"/>
Oestrogen/HRT (2 Factors)	<input type="checkbox"/>	Positive history VTE first degree relative	<input type="checkbox"/>
Previous DVT/PE (6 Factors)	<input type="checkbox"/>	Pregnancy (3 Factors)	<input type="checkbox"/>
Hypercoaguable state (6 Factors)	<input type="checkbox"/>	Puerperium (6 Factors)	<input type="checkbox"/>
Immobility after long haul travel	<input type="checkbox"/>		
Severe acute/chronic medical illness (ref p 8 SIGN Guideline 122)	<input type="checkbox"/>		

LOW RISK
(0-1 Factor)
→ Early ambulation and hydration

MEDIUM RISK
(2-3 Factors)
→ Graduated Compression Stockings (AES)

HIGH RISK
(4-5 Factors)
→ As for medium risk PLUS Sequential Compression Device (SCD) in theatre

VERY HIGH RISK
(>5 Factors)
→ As for High Risk PLUS LMW Heparin

Contraindications to AES		Contraindications to SCD		Contraindications to LMWH	
Severe leg ischaemia	<input type="checkbox"/>	As for AES		Active bleeding	<input type="checkbox"/>
Absent peripheral pulses	<input type="checkbox"/>	Suspected existing DVT	<input type="checkbox"/>	Uncorrected bleeding disorder <i>E.g haemophilia, oral anticoagulants</i>	<input type="checkbox"/>
Local cellulitis or leg deformity	<input type="checkbox"/>			Platelet count <70 x 10 ⁹ /L	<input type="checkbox"/>
Extreme leg deformity	<input type="checkbox"/>			Allergy	<input type="checkbox"/>
Fragile skin	<input type="checkbox"/>			Heparin associated thrombocytopenia	<input type="checkbox"/>
Allergy	<input type="checkbox"/>			Thyroid surgery	<input type="checkbox"/>
Leg or foot ulcers	<input type="checkbox"/>				
Unusual leg size/shape	<input type="checkbox"/>				

EXCLUSIONS to THROMBOPROPHYLAXIS

- Terminal palliation
- Surgery under local anaesthetic unless identified as high risk (use AES)

<p>No contraindications to AES/SCD identified</p> <p>AES prescribed <input type="checkbox"/></p> <p>SCD prescribed <input type="checkbox"/></p>	<p>No contraindications to LMWH identified</p> <p>Enoxaparin subcutaneous 40mg at 6pm to commence the night before surgery prescribed <input type="checkbox"/></p> <p>Enoxaparin 20mg prescribed if <50kg or eGFR <30 <input type="checkbox"/></p> <p>Discontinue at discharge or when returns to pre-morbid mobility</p>
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Patient informed of VTE risks and benefits of thromboprophylaxis YES NO N/A

Patient information leaflet provided YES NO

PRINT ASSESSORS NAME: _____ **SIGNATURE:** _____ **DATE:** _____