

Hospital Associated Thrombosis

Venous thromboembolism occurring during hospital admission or within 90 days of discharge from hospital

Background information

Patient details and VTE diagnosis	
Patient name	
Hospital number / NHS number	
DOB:	
VTE diagnosis	PE DVT
Symptomatic?	YES NO
Date of VTE diagnosis	
Patient location at diagnosis	Inpatient – during index admission Inpatient - readmission Other

Index hospital admission details	
Division / Department	
Ward	
Consultant	
Admission date	
Discharge date	
Type of admission	
Date of surgery	
Reason for admission	

Thromboprophylaxis during hospital admission			
VTE risk assessment completed?	No	Yes	
VTE risk high/low	Low	High	
Bleeding risk	Low	High	
<p>Thrombotic risk factors (tick/circle all present)</p> <p>Active cancer/treatment</p> <p>Age >60</p> <p>Known thrombophilia</p> <p>Dehydration</p> <p>Obesity (BMI>30)</p> <p>Medical comorbidity:</p> <p>Personal/FHx VTE</p> <p>COCP HRT</p> <p>Varicose veins with phlebitis</p> <p>Pregnancy/<6w post partum</p> <p>Reduced mobility >3days (could have been foreseen)</p> <p>THR TKR HFS</p> <p>Surgery + anaesthetic time >90min</p> <p>Pelvis/LL surgery +anaesthetic >60min</p> <p>Acute surgical admission with inflammatory or intra-abdo condition</p> <p>Critical care admission</p> <p>Surgery with significant reduction in mobility</p>			
<p>Contraindications to TP? (tick/circle all present)</p> <p>Active bleeding</p> <p>Acquired bleeding disorder</p> <p>Concurrent anticoagulants</p> <p>Acute stroke</p> <p>Thrombocytopenia</p> <p>Uncontrolled systolic hypertension</p> <p>Untreated inherited bleeding disorder</p> <p>Neurosurgery, spinal surgery or eye surgery</p> <p>Other procedure with high bleeding risk</p> <p>LP/epidural/spinal expected in next 12h</p> <p>LP/epidural/spinal in past 4h</p>			
Type of mechanical TP used	AES	IPC	Both
Date mechanical TP commenced and ceased			
Chemical TP prescribed?	No	Yes	
Type and dose of chemical TP?			
Date commenced and ceased			
Chemical TP administered as prescribed?			
Patient weight			
Creatinine clearance (eGFR)			
Extended TP prescribed?			

Root Cause Analysis (RCA) by thrombosis team / lead clinician

Was this event a Hospital Associated Thrombosis?

Yes No Possibly

Was this event potentially preventable?

Yes No Possibly

Is further information required?

Yes No

What were the **Care and Service Delivery Problems?** (From RCA Q1 above)

Risk assessment:	
• Not risk assessed	
• Incorrect risk assessment	
• Other:	
Thromboprophylaxis:	
• Thromboprophylaxis failure	
• Chemical TP - Not prescribed	
• Chemical TP - Delay in prescribing	
• Chemical TP - Not administered as prescribed	
• Chemical TP - Prematurely discontinued	
• Chemical TP - Wrong dose	
• Chemical TP - Contraindication	
• Mechanical TP - Not considered	
• Mechanical TP - No documentation	
Other (please detail):	
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Questions for Consultant

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Suggested Solutions/Improvements (from responsible clinician):

	Suggested / Planned / Tried / Implemented
	Suggested / Planned / Tried / Implemented

Is there a duty of candour responsibility? (to be completed by thrombosis team following analysis of further information)

Yes No