



REDUCING THE RISK OF VENOUS THROMBOEMBOLISM IN HOSPITALIZED PATIENTS UNDER GYNECOLOGY SERVICE

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INTRODUCTION

Currently there is no formal VTE risk assessment for hospitalized gynecological patients.
Therefore eligible hospitalized gynecology patients do not receive appropriate thromboprophylaxis according to their level of risk.

OBJECTIVE

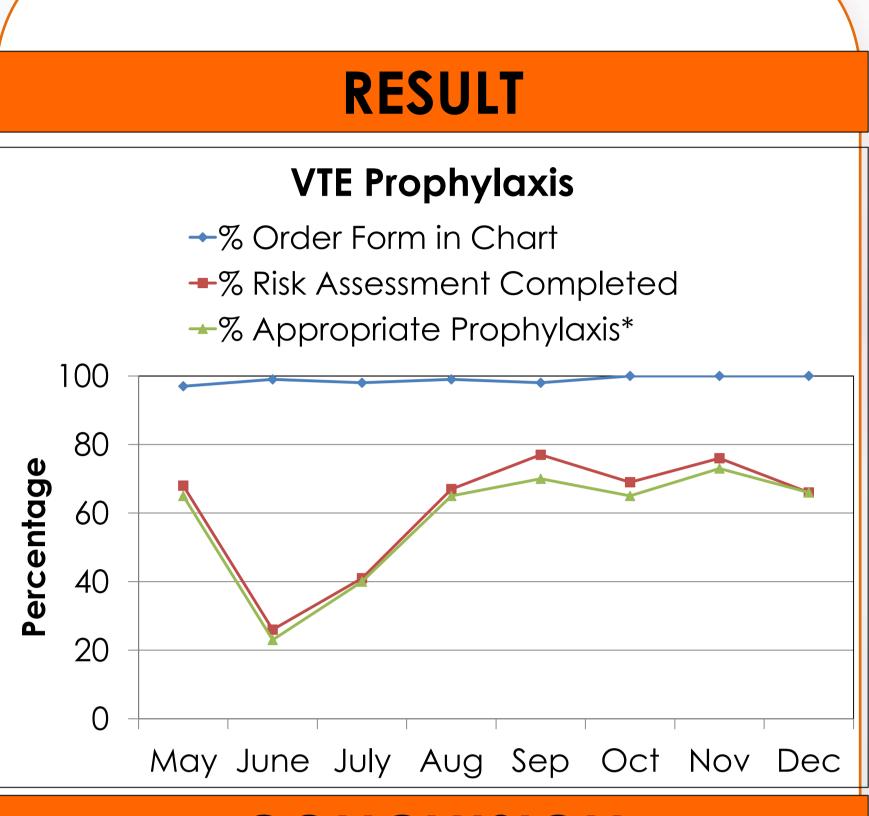
By December 2013 ,100% of hospitalized patients under gynecological service will undergo VTE risk assessment and 75% of eligible hospitalized patients will receive appropriate VTE prophylaxis according to a patient's assessed status of VTE risk as per hospital-approved protocols.

METHOD

- Placement of physician order sheets in all files next to the patient admission assessment form
- Education of physician and nurses regarding the protocol and the physician order sheet
- Ensuring of risk assessment allocation of risk and appropriate thromboprophylaxis for all admitted patients

REFERENCES

Scottish Intercollegiate Guidelines Network. Prophylaxis of venous thromboembolism: a national clinical guideline.DEC 2010; No. 122. http://www.sign.ac.uk



CONCLUSION

Following the implementation of the protocol we have achieved:

- 100 % compliance in placing the order sheet in patient case sheet and 90% compliance in risk assessment.
- There is significant improvement in providing appropriate thromboprophylaxis but we need to take more active steps to achieve our goal which is 75%.
- Lack of motivation compliance and ownership were considered as the main causes for the failure to achieve the goal

SUSTAINABILITY

To achieve 75% compliance in providing appropriate thrombo-prophylaxis.

- Frequent re-evaluation and follow-up of the process by spot checks
- To ensure more active involvement of senior physicians to oversee the compliance