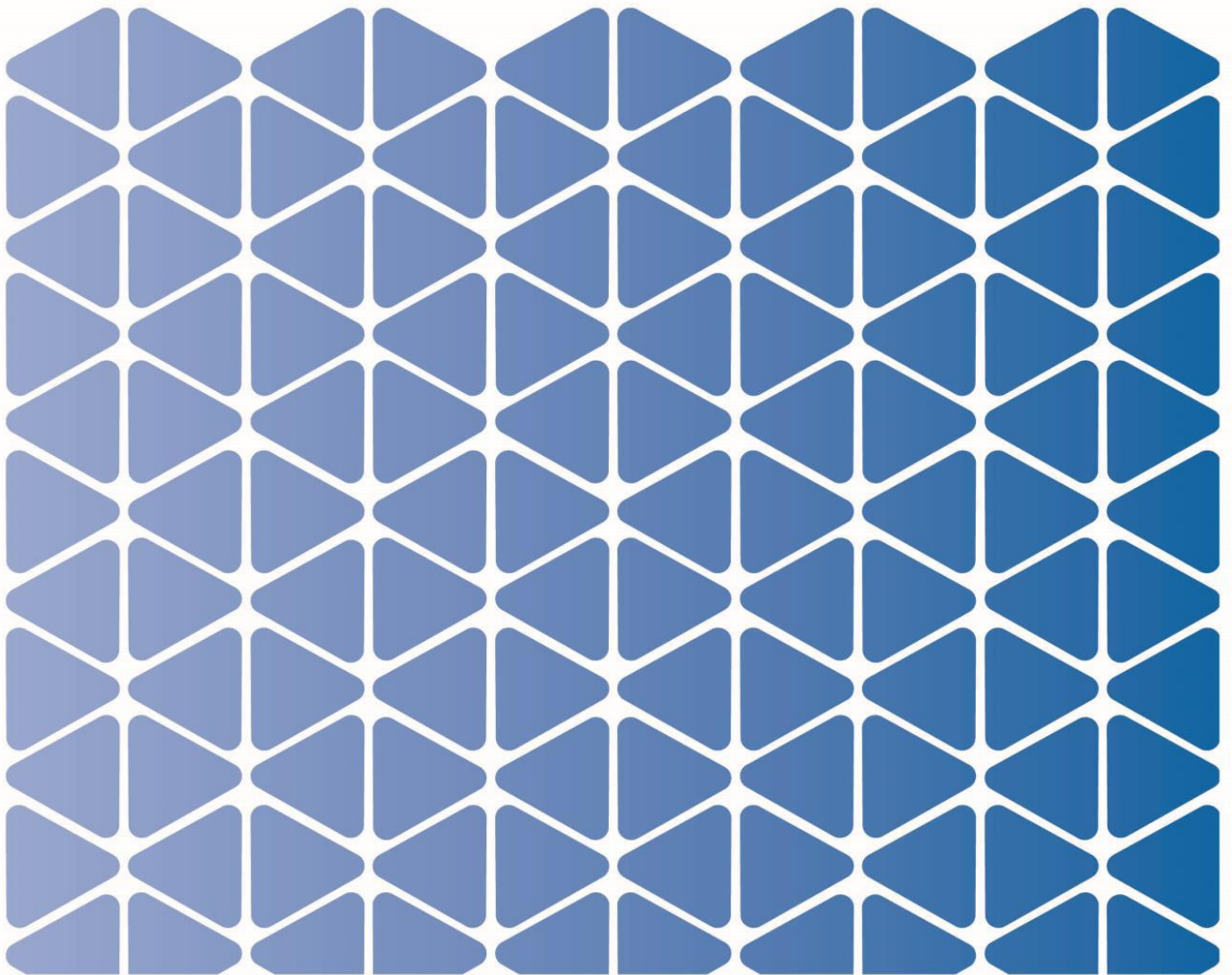




PATIENT INFORMATION

Preventing Blood Clots When You Are In Hospital

Information for patients receiving
Thromboprophylaxis treatment



Introduction

Every year, thousands of people in the UK develop a blood clot in a vein. It's known as venous thromboembolism (VTE) and is a serious, potentially fatal, medical condition.

VTE is the collective name for:

- deep vein thrombosis (DVT) – a blood clot in in one of the deep veins in the body, usually in one of the legs
- pulmonary embolism (PE) – a blood clot in the blood vessel that carries blood from the heart to the lungs

Who gets blood clots?

Anyone can get a blood clot, but you're more at risk if you can't move around much or if you're unwell. Your risk is increased if you:

- are over 60 years old
- are overweight or obese
- have had a blood clot before
- taking some drugs e.g. HRT, the combined oral contraceptive pill
- are pregnant or have recently given birth
- are dehydrated
- have cancer or are having cancer treatment
- have a condition that causes your blood to clot more easily than normal.
- critical care admission
- pre-existing major medical illness
- acute surgical admission
- prolonged immobility

Signs and symptoms include:

Of a DVT:

- leg pain or tenderness
- leg swelling
- leg warm to touch
- redness of the leg

Of a PE:

- shortness of breath or difficulty breathing
- chest pain
- coughing up blood
- sudden collapse

However, they can occur without symptoms.

Assessing your risk of blood clots

You will be assessed as to your risk of developing a VTE on admission and if you are felt to be at risk given appropriate preventative treatment. The options for treatment include:

Compression Stockings

These special stockings help the blood flow in the legs if worn correctly. You will be shown how to put them on whilst you are in hospital. They should be worn day and night until you are back to your normal mobility level. You may be required to carry on wearing them after discharge home. Ask the hospital staff for advice before you are discharged.

Compression Devices

The hospital staff may ask you to wear calf or foot pumps; special inflatable sleeves around your legs or feet. These will increase the blood flow out of your legs.

Medication

Most patients at risk will be prescribed blood-thinning medication (anticoagulants). This could be in the form of tablet or injection. If you are advised to continue this medication after discharge home hospital staff will ensure that you or your carer are supported and shown how to give it.

Keep moving

It is important to move as soon as possible. This is sometime the only measure needed.

Leg exercises

Point your toes down and bend the foot up at regular intervals as this helps pump the blood back to the heart. Rotate your ankles. If you are unsure speak to your nurse or physiotherapist who will be able to advise.

Drink plenty of fluids

Dehydration can also increase your risk of DVT, so make sure if your condition allows you drink enough water and other fluids.

Useful information

Please ask hospital staff about reducing your risk of blood clots. Questions you might like to ask staff about blood clots are:

- Am I at risk of blood clots?
- How likely am I to have bleeding problems?
- What happens if I have problems with a medication or treatment I have to help prevent clots?

On discharge home it is important to know that you are at an increased risk of developing a VTE for up to 6 weeks. If you develop any of the symptoms please report them to your GP.

Further information:

<http://www.thrombosis-charity.org.uk>

www.nice.org.uk/guidance/gs3

VTE prevention App

<http://www.vte-prevention.co.uk/>



Patient Experience

Being admitted to hospital can be a worrying and unsettling time. If you have any concerns or questions you should speak to a member of staff in the ward or department who will do their best to reassure you. If you are not happy with their response, you can ask to speak to someone in charge.

Patient Advice and Liaison Service (PALS)

Our PALS staff will provide advice and can liaise with staff on your behalf if you feel you are unable to do so. They will also advise you what to do if your concerns have not been addressed. If you wish to discuss making a formal complaint PALS can provide information on how to do this. Telephone: 0300 123 1732. Monday to Thursday 8.30am to 4.30pm. Friday 8.30am to 4pm. An answerphone operates outside office hours. Or email us at: wah-tr.PET@nhs.net

Feedback

Feedback helps us highlight good practice and where we need to improve. There are lots of ways you can give feedback including completing a Friends and Family Test card or undertaking a survey. For further information please speak to a member of staff, see our Patient Experience leaflet or visit

www.worcsacute.nhs.uk/contact-us

If you would like this leaflet in an alternative language or format, such as audio or braille, please ask a member of staff.

Polish

Jeżeli są Państwo zainteresowani otrzymaniem niniejszej ulotki w innej wersji językowej lub formacie, prosimy zwrócić się w tej sprawie do członka naszego personelu.

Bengali

আপনি যদি এই লিফলেটটি অন্য ভাষায় বা ফর্ম্যাটে পেতে চান যেমন, অডিও বা ব্রেইল তাহলে অনুগ্রহ করে সদস্য বা কর্মীদেরকে তা জানান।

Urdu

اگر اس کتابچہ کو آپ کسی متبادل زبان یا ہیئت جیسے آڈیو یا بریل میں چاہتے ہیں، تو برائے کرم اسٹاف رکن سے مانگیں۔

Romanian

Pentru a obține această broșură în altă limbă sau în alt format fie audio sau limbajul Braille, vă rugăm să apelați la un membru al personalului.

Portuguese

Caso deseje este folheto numa língua ou formato alternativos, tal como ficheiro áudio ou em Braille, por favor dirija-se a um dos nossos funcionários.

Chinese(Mandarin)

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