

## AB177. 101. Venous thromboembolic (VTE) prophylaxis

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**Background:** Venous thromboembolic (VTE) disease is a common complication of hospitalised patients. VTE prophylaxis (VTEP) is considered a quality measure in surgical care, there has been little amount of evidence from Irish practice. VTE contributes significantly to length of hospital stay, morbidity and mortality. VTEP has led to decrease incidence of DVT and PE amongst hospitalised patients. The objective of this study is to demonstrate the compliance of our acute surgical unit to NICE guidelines in thromboprophylaxis of hospitalised patients.

**Methods:** We selected surgical patients admitted over a 7-day period from the 19th of March 2017 to 25th of March

2017. Data collected from chart review include age, reason for admission, weight, estimated glomerular filtration rate (eGFR), anticoagulation status, VTEP and contraindications.

**Results:** Eight-three admissions, 63 charts were available for analysis. Thirty-eight (60%) patients were placed on VTEP on admission, while 25 (40%) patients were not. Of the patients not placed on VTEP, six patients were already on anticoagulation prior to admission. Amongst the 19 patients remaining, 3 were discharged home within 24 hours, five patients were admitted due to significant bleed and 11 (17%) had no documented VTEP. Enoxaparin was the preferred choice of anticoagulation.

**Conclusions:** Compliance with VTEP was 83% in this study period. A number of steps can be taken to further improve this study, noncompliance requires improved documentation and this study highlights the need for continuous education.

**Keywords:** Venous; thromboembolic; prophylaxis; compliance

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