

AB181. SOH21AS205. Venous thromboembolism prophylaxis in general surgical patients undergoing elective and emergency procedures in a model 3 hospital: outcomes and non-consultant hospital doctors' perspectives

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Background: Venous thromboembolism (VTE) is a common preventable cause of morbidity and mortality in general surgical patients, with over half of this population estimated to be at moderate risk.

Methods: An audit of VTE prophylaxis practice was carried out in Mayo University Hospital (MUH) during October and November 2020 in all general surgical non-paediatric patients undergoing elective and emergency procedures. Assessment of indications and contra-indications to VTE prophylaxis, dosing and timing of administration of VTE prophylaxis, and general surgical personnel's awareness and proficiency of these factors, was carried out.

Results: Fifty-six elective and 36 emergency procedures were performed during October–November. Seventy-nine percent of elective patients were risk stratified using the Caprini score. Seventeen percent did not receive pharmacological VTE prophylaxis. In all cases where pharmacological VTE prophylaxis was not prescribed, it was incorrectly done so on two occasions. Ninety-one percent of patients who received pharmacological VTE prophylaxis were correctly prescribed it. Timing of administration of pharmacological VTE prophylaxis was incorrect in 18% of cases. Missed contraindications to pharmacological and mechanical VTE prophylaxis did not occur for any patient.

17 of 20 general surgical non-consultant hospital doctors (NCHDs) responded. Seventy-eight percent felt adept at appropriately prescribing VTE prophylaxis.

Conclusions: There are high rates of appropriate prescribing of VTE prophylaxis in general surgical patients undergoing elective and emergency procedures in our institution. A large proportion of NCHDs using assessment systems such as the Caprini score may have ensured this accurate and appropriate VTE prophylaxis prescribing and could act as a potential model for use in other general surgical services.

Keywords: Anticoagulation; caprini; elective; emergency; prescribing; prophylaxis; venous thromboembolism (VTE)

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Footnote

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Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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