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## Adherence to VTE prophylaxis guidelines on a surgical ward in Midlands Regional Hospital Tullamore

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**Background:** Risk factors associated with venous thromboembolism (VTE) include immobilisation, recent surgery, malignancy, and infection. Surgical patients in particular often have several risk factors for VTE. As per National Institute for Health and Care Excellence (NICE) guidelines, all patients at risk of VTE over 16 years should start pharmacological prophylaxis within 14 h of admission. Antiembolism stockings (AES) are also recommended. The aim of this audit was to assess adherence to VTE prophylaxis guidelines on the surgical ward.

**Methods:** An audit of the surgical ward was performed over a 20-day period. The records and drug charts of 111 patients were reviewed. Variables recorded included patient demographics, reason for admission, prescribed anticoagulants, AES and adherence to same. The implementation phase included presentation of findings for surgical ward staff and a poster of the audit results was displayed. Plans to reaudit and close the loop are in place for early 2023.

**Results:** Overall compliance for Enoxaparin prescription was 62%. Of the cohort not prescribed enoxaparin, 13% were on alternative anticoagulants, 39% had a high bleeding risk. Of those not prescribed enoxaparin, 48% had no bleeding risk identified. In total, 48% of patients were

prescribed AES and of these, 40% were in-situ. Weight was recorded on 29% of drug charts.

**Conclusions:** Quality improvement points identified during this audit include the need for documentation of patient's weight on drug charts upon admission as well as application of AES when prescribed. When patients are not prescribed Enoxaparin, a clear reason should also be given. Through education and communication, VTE prophylaxis adherence can be improved.

**Keywords:** Adherence; antiembolism stockings; nice guidelines; prophylaxis; venous thromboembolism

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### Footnote

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

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