## Managing VTE Risk Across the Continuum of Care: Orthopedic Surgery Patients

### Prehospitalization

**Assess Patients at Risk**
- VTE risk: all hip and knee arthroplasty patients are at high risk; history of prior VTE is another clinical consideration
- Bleeding risk: known bleeding disorders (e.g., hemophilia) and active liver disease increase risk

**Create Medication List**
- Upon admission
- Include all Rx and OTC medications, vitamin/mineral supplements, & herbal supplements

### Hospital

**Preoperative**

**Employ Appropriate Thromboprophylaxis**
- Patients whose only risk for VTE or bleeding are the surgery itself: pharmacologic agents and/or mechanical compressive devices

**Postoperative**

**Mobilize Patients as Soon as Feasible**
- ACCP guidelines recommend that therapy continue for a minimum of 10 to 14 days for all patients; and for those undergoing major orthopedic surgery, prophylaxis should continue >10 days and up to 35 days

**Continue Thromboprophylaxis**
- AAOS guidelines recommend that patients and physicians discuss the duration of thromboprophylaxis for each individual situation.

### Hospital Discharge

**Emphasize Ongoing Prevention Efforts**
- Provide patient/caregiver with education/instructions
- Provide patient/caregiver with discharge summary and medication reconciliation list
- Provide follow-up visits with HCPs
- Provide prescription for VTE prophylaxis and patient assistance information to help ensure access and coverage of medications
- Discuss medication management and adherence
- Discuss follow-up care

### Postdischarge

**Follow Up With Patient**
- Ask about:
  - Healing, mobility and pain
  - Medication adherence; adverse drug reactions
  - Potential DVT/PE symptoms
- Follow-up visits with HCPs

**Follow Up With Next Site of Care (if applicable)**
- Ensure that complete information was received

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Abbreviations: AAOS = American Academy of Orthopaedic Surgeons; ACCP = American College of Chest Physicians; DVT = deep vein thrombosis; HCP = healthcare professional; OTC = over the counter; PE = pulmonary embolism; Rx = prescription; VTE = venous thromboembolism.

**References:**

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