

# Ortho-Trauma Service DVT PPX GUIDELINE (rev 5/18)

This is simply a guideline. Treatment for reach individual patient must be based on clinical judgment.

ISOLATED UPPER EXTREMITY INJURY: SCDs

UNILATERAL LOWER EXTREMITY INJURY:

PRE-OP/POST-OP: SCDs, Lovenox 40 q pm

DISCHARGE: ECASA 325mg po bid x 14 days to take with food, +NEXIUM 40mg po daily x 14 days

HIP/ PELVIS/ACETABULUM FRACTURE (OP/NON-OP):

PRE-OP/POST-OP/NON-OP: SCDs, Lovenox 40 q pm

DISCHARGE: Lovenox 40 q pm x 4 weeks

BILATERAL LOWER/MULTIPLE EXTREMITY INJURIES:

PRE-OP/POST OP: SCDs, Lovenox 40 q pm

DISCHARGE: Lovenox 40 q pm x 6 weeks

OTHER:

Newly WC bound patients should discharged on 6 weeks of Lovenox 40 q pm

Baseline wheelchair bound patients should be assessed case by case with the attending

Patients who are being discharged to return for more orthopedic surgery, discharge them on Lovenox 40 q pm

Patients that are high risk for DVT (history of DVT/PE, hypercoagulable state, active cancer, etc.) require screening ultrasound to evaluate for DVT. Discharge on Lovenox for negative study. Discuss treatment of positive study with attending.