

VTE PROPHYLAXIS PRODUCT SUMMARY Low Molecular Weight Heparins (LMWH)

- For **ALL** inpatients complete each of the following the patient's record (electronic or otherwise):
 - VTE Risk Assessment
 - o Bleeding Risk
 - Decision Pathway
 - o 24 hour VTE reassessment
- IMPORTANT: do not assess a patient is at risk and then omit prophylaxis
- Where indicated, prescribe LMWH by dose in UNITS (or mg) ONCE DAILY by S/C injection at 18:00
- If the patient is admitted between 18:00 hours and 04:00 hours prescribe stat dose of LMWH
- For pregnancy and puerperium consult the BNF
- The patient's weight <u>must</u> be recorded at all times on any Medicines Administration Record Chart and in the patient's record (electronic or otherwise)
 - If known, use actual weight (ask patient/carer if possible)
 - Otherwise use an estimated weight
- SUGGESTIONS TO ASCERTAIN WEIGHT OF IMMOBILE PATIENTS
 - Where possible weigh patients on admission
 - Look for a previous recent weight (last 3 months) in patient records, outpatient records, old drug charts which may all have weights documented.
 - Ask the patient/relative if they know their approximate weight. Or contact the nursing/residential home/community team for a recent weight.

FIRST LINE TRUST WIDE- DALTEPARIN

Dalteparin for VTE prophylaxis in adults (excluding pregnancy and puerperium) ONCE DAILY by S/C injection. Use the prefilled syringes					
Syringe	Type of patient	Dose	Volume		
Fragining Control of the Control of	Dialysis patients ONLY	2500 Units OD	0.2mL		
Fragifility 5,000 III)	All other patients	5000 Units OD	0.2 mL		
For special circumstances, discuss with Haematology					



SECOND LINE TRUST WIDE- TINZAPARIN (To be used where Dalteparin is not available)

Tinzaparin for VTE prophylaxis in adults (excluding pregnancy and puerperium)						
ONCE DAILY by S/C injection. Use the 10000 Units/mL syringes in the colours below						
Syringe	Body Weight	Dose	Volume			
	30.0 to 50.0 Kg	2500 Units OD	0.25 mL			
	50.1 to 70.0 Kg	3500 Units OD	0.35 mL			
	70.1 to 130.0 Kg	4500 Units OD	0.45 mL			
<30 Kg or > 130.1 Kg- Consider 50 units/Kg OD Seek the advice of a consultant haematologist						
RENAL IMPAIRMENT- REDUCE DOSE (below)						
Reduced dose if	30 Kg to 70 Kg	2500 Units OD	0.25 mL			
CrCl < 20mL/min	70.1 Kg to 130 Kg	3500 Units OD	0.35 mL			

THIRD LINE TRUST WIDE- ENOXAPARIN (To be used where Dalteparin AND Tinzaparin are not available)

Enoxaparin for VTE prophylaxis in adults (excluding pregnancy and puerperium)					
ONCE DAILY by S/C injecti	on. Use the 100mg/mL	syringes in the colour	s below		
Syringe	Risk	Dose	Volume		
-practo-	Low	20mg OD	0.2 mL		
Day of the state o	High	40mg OD	0.4 mL		
RENAL IMPAIRMENT- AVOID	IF CREATININE CLEAR	ANCE LESS THAN 15 m	L/MINUTE		
Risk of bleeding increase	d; use of unfractionate	d heparin may be pref	ferable		