

DVT Risk and Prophylaxis Tool [2085]

General

Nursing

IV Fluids

Labs

VTE

DVT Risk and Prophylaxis Tool (Single Response) (Selection Required)

URL: "\appt1.pdf"

- Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis with Risk Stratification (Single Response) (Selection Required)
- Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)
- | | |
|---|--|
| <input type="checkbox"/> Moderate risk of VTE | Routine, Once |
| <input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis | Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: |
| <input type="checkbox"/> Place sequential compression device (Single Response) | |
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |
- Moderate Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)
- | | |
|---|--|
| <input type="checkbox"/> Moderate risk of VTE | Routine, Once |
| <input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis | Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: |
| <input type="checkbox"/> Place sequential compression device (Single Response) | |
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |
- High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)
- | | |
|---|--|
| <input type="checkbox"/> High risk of VTE | Routine, Once |
| <input type="checkbox"/> Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis | Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: |
| <input type="checkbox"/> Place sequential compression device (Single Response) | |
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |
- High Risk - Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis (Selection Required)

| | | |
|--------------------------|---|--|
| <input type="checkbox"/> | High risk of VTE | Routine, Once |
| <input type="checkbox"/> | Patient currently has an active order for therapeutic anticoagulant or VTE prophylaxis | Routine, Once No pharmacologic VTE prophylaxis because: patient is already on therapeutic anticoagulation for other indication. Therapy for the following: |
| <input type="checkbox"/> | Place sequential compression device (Single Response) | |
| <input type="checkbox"/> | Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> | Place/Maintain sequential compression device continuous | Routine, Continuous |
| <input type="checkbox"/> | LOW Risk of DVT (Selection Required) | |
| | Low Risk Definition Age less than 60 years and NO other VTE risk factors | |
| <input type="checkbox"/> | Low Risk (Single Response) (Selection Required) | |
| <input type="checkbox"/> | Low risk of VTE | Routine, Once Low risk: Due to low risk, no VTE prophylaxis is needed. Will encourage early ambulation |
| <input type="checkbox"/> | MODERATE Risk of DVT - Surgical (Selection Required) | |
| | Moderate Risk Definition Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. One or more of the following medical conditions: CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Age 60 and above Central line History of DVT or family history of VTE Anticipated length of stay GREATER than 48 hours Less than fully and independently ambulatory Estrogen therapy Moderate or major surgery (not for cancer) Major surgery within 3 months of admission | |
| <input type="checkbox"/> | Moderate Risk (Selection Required) | |
| <input type="checkbox"/> | Moderate risk of VTE | Routine, Once |
| <input type="checkbox"/> | Moderate Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required) | |
| <input type="checkbox"/> | Contraindications exist for pharmacologic prophylaxis BUT order Sequential compression device | "And" Linked Panel |
| <input type="checkbox"/> | Contraindications exist for pharmacologic prophylaxis | Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> | Place/Maintain sequential compression device continuous | Routine, Continuous |
| <input type="checkbox"/> | Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis | "And" Linked Panel |
| <input type="checkbox"/> | Contraindications exist for pharmacologic prophylaxis | Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> | Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> | enoxaparin (LOVENOX) injection (Single Response) (Selection Required) | |
| <input type="checkbox"/> | enoxaparin (LOVENOX) syringe | 40 mg, subcutaneous, daily at 0600, Starting S+1 |
| <input type="checkbox"/> | patients with CrCL LESS than 30 mL/min | 30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min |

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|---|--|
| <input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min | 30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min | 40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patient weight of 140 kg or GREATER and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> fondaparinux (ARIXTRA) injection | 2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT): |
| <input type="checkbox"/> heparin (porcine) injection | 5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM |
| <input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) | 5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs. |
| <input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg | 7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM For patients with weight GREATER than 100 kg. |
| <input type="checkbox"/> warfarin (COUMADIN) tablet | oral, daily at 1700, Starting S+1 Indication: |
| <input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN) | STAT, Until discontinued, Starting S Indication: |
| <input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required) | |
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |
| <input type="checkbox"/> MODERATE Risk of DVT - Non-Surgical (Selection Required) | |
| Moderate Risk Definition Pharmacologic prophylaxis must be addressed. Mechanical prophylaxis is optional unless pharmacologic is contraindicated. One or more of the following medical conditions: CHF, MI, lung disease, pneumonia, active inflammation, dehydration, varicose veins, cancer, sepsis, obesity, previous stroke, rheumatologic disease, sickle cell disease, leg swelling, ulcers, venous stasis and nephrotic syndrome Age 60 and above Central line History of DVT or family history of VTE Anticipated length of stay GREATER than 48 hours Less than fully and independently ambulatory Estrogen therapy Moderate or major surgery (not for cancer) Major surgery within 3 months of admission | |
| <input type="checkbox"/> Moderate Risk (Selection Required) | |
| <input type="checkbox"/> Moderate risk of VTE | Routine, Once |
| <input type="checkbox"/> Moderate Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required) | |
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis - Order Sequential compression device | "And" Linked Panel |
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis | Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis AND mechanical prophylaxis | "And" Linked Panel |

| | | |
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| <input type="checkbox"/> | Contraindications exist for pharmacologic prophylaxis | Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> | Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required) | | |
| <input type="checkbox"/> | enoxaparin (LOVENOX) syringe | 40 mg, subcutaneous, daily at 1700, Starting S |
| <input type="checkbox"/> | patients with CrCL LESS than 30 mL/min | 30 mg, subcutaneous, daily at 1700, Starting S For Patients with CrCL LESS than 30 mL/min |
| <input type="checkbox"/> | patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min | 30 mg, subcutaneous, 2 times daily, Starting S For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> | patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min | 40 mg, subcutaneous, 2 times daily, Starting S For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> | fondaparinux (ARIXTRA) injection | 2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT), do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT): |
| <input type="checkbox"/> | heparin (porcine) injection | 5,000 Units, subcutaneous, every 8 hours |
| <input type="checkbox"/> | heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) | 5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs. |
| <input type="checkbox"/> | HEParin (porcine) injection - For Patients with weight GREATER than 100 kg | 7,500 Units, subcutaneous, every 8 hours For patients with weight GREATER than 100 kg. |
| <input type="checkbox"/> | warfarin (COUMADIN) tablet | oral, daily at 1700 Indication: |
| <input type="checkbox"/> | Pharmacy consult to manage warfarin (COUMADIN) | STAT, Until discontinued, Starting S Indication: |
| <input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required) | | |
| <input type="checkbox"/> | Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> | Place/Maintain sequential compression device continuous | Routine, Continuous |
| <input type="checkbox"/> HIGH Risk of DVT - Surgical (Selection Required) | | |
| High Risk Definition | | |
| Both pharmacologic AND mechanical prophylaxis must be addressed. | | |
| One or more of the following medical conditions: | | |
| Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders) | | |
| Severe fracture of hip, pelvis or leg | | |
| Acute spinal cord injury with paresis | | |
| Multiple major traumas | | |
| Abdominal or pelvic surgery for CANCER | | |
| Acute ischemic stroke | | |
| History of PE | | |
| <input type="checkbox"/> High Risk (Selection Required) | | |
| <input type="checkbox"/> | High risk of VTE | Routine, Once |
| <input type="checkbox"/> High Risk Pharmacological Prophylaxis - Surgical Patient (Single Response) (Selection Required) | | |
| <input type="checkbox"/> | Contraindications exist for pharmacologic prophylaxis | Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): |

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| <input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required) | |
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe | 40 mg, subcutaneous, daily at 0600, Starting S+1 |
| <input type="checkbox"/> patients with CrCL LESS than 30 mL/min | 30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min |
| <input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min | 30 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min | 40 mg, subcutaneous, 2 times daily at 0600, 1800, Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> fondaparinux (ARIXTRA) injection | |
| | 2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT): |
| <input type="checkbox"/> heparin (porcine) injection | 5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM |
| <input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) | 5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs. |
| <input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg | 7,500 Units, subcutaneous, every 8 hours, Starting S+1 For patients with weight GREATER than 100 kg. |
| <input type="checkbox"/> warfarin (COUMADIN) tablet | oral, daily at 1700, Starting S+1 Indication: |
| <input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN) | STAT, Until discontinued, Starting S Indication: |

Mechanical Prophylaxis (Single Response) (Selection Required)

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| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |

HIGH Risk of DVT - Non-Surgical (Selection Required)

High Risk Definition

Both pharmacologic AND mechanical prophylaxis must be addressed.

One or more of the following medical conditions:

Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders)

Severe fracture of hip, pelvis or leg

Acute spinal cord injury with paresis

Multiple major traumas

Abdominal or pelvic surgery for CANCER

Acute ischemic stroke

History of PE

High Risk (Selection Required)

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|---|---------------|
| <input type="checkbox"/> High risk of VTE | Routine, Once |
|---|---------------|

High Risk Pharmacological Prophylaxis - Non-Surgical Patient (Single Response) (Selection Required)

| | |
|--|---|
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis | Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): |
|--|---|

enoxaparin (LOVENOX) injection (Single Response)
(Selection Required)

| | |
|---|--|
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe | 40 mg, subcutaneous, daily at 1700, Starting S |
| <input type="checkbox"/> patients with CrCL LESS than 30 mL/min | 30 mg, subcutaneous, daily at 1700, Starting S For Patients with CrCL LESS than 30 mL/min |

| | |
|--|--|
| <input type="checkbox"/> patients weight between 100-139 kg AND CrCl GREATER than 30 mL/min | 30 mg, subcutaneous, 2 times daily, Starting S For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> patients weight 140 kg or GREATER AND CrCl GREATER than 30 mL/min | 40 mg, subcutaneous, 2 times daily, Starting S For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> fondaparinux (ARIXTRA) injection | 2.5 mg, subcutaneous, daily If the patient does not have a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min. This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT): |
| <input type="checkbox"/> heparin (porcine) injection | 5,000 Units, subcutaneous, every 8 hours |
| <input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) | 5,000 Units, subcutaneous, every 12 hours Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs. |
| <input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg | 7,500 Units, subcutaneous, every 8 hours For patients with weight GREATER than 100 kg. |
| <input type="checkbox"/> warfarin (COUMADIN) tablet | oral, daily at 1700 Indication: |
| <input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN) | STAT, Until discontinued, Starting S Indication: |
| <input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required) | |
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |
| <input type="checkbox"/> HIGH Risk of DVT - Surgical (Hip/Knee) (Selection Required) | |
| High Risk Definition Both pharmacologic AND mechanical prophylaxis must be addressed. One or more of the following medical conditions: Thrombophilia (Factor V Leiden, prothrombin variant mutations, anticardiolipin antibody syndrome; antithrombin, protein C or protein S deficiency; hyperhomocysteinemia; myeloproliferative disorders) Severe fracture of hip, pelvis or leg Acute spinal cord injury with paresis Multiple major traumas Abdominal or pelvic surgery for CANCER Acute ischemic stroke History of PE | |
| <input type="checkbox"/> High Risk (Selection Required) | |
| <input type="checkbox"/> High risk of VTE | Routine, Once |
| <input type="checkbox"/> High Risk Pharmacological Prophylaxis - Hip or Knee (Arthroplasty) Surgical Patient (Single Response) (Selection Required) | |
| <input type="checkbox"/> Contraindications exist for pharmacologic prophylaxis | Routine, Once No pharmacologic VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> aspirin chewable tablet | 162 mg, oral, daily, Starting S+1 |
| <input type="checkbox"/> aspirin (ECOTRIN) enteric coated tablet | 162 mg, oral, daily, Starting S+1 |
| <input type="checkbox"/> Apixaban and Pharmacy Consult (Selection Required) | |
| <input type="checkbox"/> apixaban (ELIQUIS) tablet | 2.5 mg, oral, 2 times daily, Starting S+1 Indications: VTE prophylaxis |
| <input type="checkbox"/> Pharmacy consult to monitor apixaban (ELIQUIS) therapy | STAT, Until discontinued, Starting S Indications: VTE prophylaxis |
| <input type="checkbox"/> enoxaparin (LOVENOX) injection (Single Response) (Selection Required) | |
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe | 40 mg, subcutaneous, daily at 0600, Starting S+1 |

| | |
|--|--|
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe | 30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 |
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients with CrCL LESS than 30 mL/min | 30 mg, subcutaneous, daily at 0600, Starting S+1 For Patients with CrCL LESS than 30 mL/min. |
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min | 30 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight between 100-139 kg and CrCl GREATER than 30 mL/min. |
| <input type="checkbox"/> enoxaparin (LOVENOX) syringe - For Patients weight between 140 kg or GREATER and CrCl GREATER than 30 mL/min | 40 mg, subcutaneous, 2 times daily at 0600, 1800 (TIME CRITICAL), Starting S+1 For Patients weight 140 kg or GREATER and CrCl GREATER than 30 mL/min |
| <input type="checkbox"/> fondaparinux (ARIXTRA) injection | 2.5 mg, subcutaneous, daily, Starting S+1 If the patient does not have a history or suspected case of Heparin-Induced Thrombocytopenia (HIT) do NOT order this medication. Contraindicated in patients LESS than 50kg, prior to surgery/invasive procedure, or CrCl LESS than 30 mL/min This patient has a history of or suspected case of Heparin-Induced Thrombocytopenia (HIT): |
| <input type="checkbox"/> heparin (porcine) injection | 5,000 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM |
| <input type="checkbox"/> heparin (porcine) injection (Recommended for patients with high risk of bleeding, e.g. weight < 50kg and age > 75yrs) | 5,000 Units, subcutaneous, every 12 hours, S+1 at 6:00 AM Recommended for patients with high risk of bleeding, e.g. weight LESS than 50kg and age GREATER than 75yrs. |
| <input type="checkbox"/> HEParin (porcine) injection - For Patients with weight GREATER than 100 kg | 7,500 Units, subcutaneous, every 8 hours, S+1 at 6:00 AM For patients with weight GREATER than 100 kg. |
| <input type="checkbox"/> Rivaroxaban and Pharmacy Consult (Selection Required) | |
| <input type="checkbox"/> rivaroxaban (XARELTO) tablet for hip or knee arthroplasty planned during this admission | 10 mg, oral, daily at 0600 (TIME CRITICAL) Indications: VTE prophylaxis |
| <input type="checkbox"/> Pharmacy consult to monitor rivaroxaban (XARELTO) therapy | STAT, Until discontinued, Starting S Indications: VTE prophylaxis |
| <input type="checkbox"/> warfarin (COUMADIN) tablet | oral, daily at 1700, Starting S+1 Indication: |
| <input type="checkbox"/> Pharmacy consult to manage warfarin (COUMADIN) | STAT, Until discontinued, Starting S Indication: |
| <input type="checkbox"/> Mechanical Prophylaxis (Single Response) (Selection Required) | |
| <input type="checkbox"/> Contraindications exist for mechanical prophylaxis | Routine, Once No mechanical VTE prophylaxis due to the following contraindication(s): |
| <input type="checkbox"/> Place/Maintain sequential compression device continuous | Routine, Continuous |