

## AT HOME

### Heparin Injections

If your doctors think that you are at high risk of getting a DVT, they may recommend that you continue with a daily injection of heparin after you go home. You will be told how long this should continue and be shown how to give the injections yourself.

### Exercise & Activity

It is important to keep as active as possible. When sitting or lying, flex your feet upwards and make circular movements with them at regular intervals to keep the blood flowing in your legs.

### Fluid Intake

Drink plenty of fluids and aim to drink at least a glass of water every hour, or two litres each day. This will help prevent you from becoming dehydrated and further reduce risk of DVT.

### Compression Stockings

If you had stockings fitted in hospital, then continue to wear these until you are back to your normal level of mobility

### IF YOU HAVE ANY OF THE FOLLOWING SIGNS OR SYMPTOMS:

- unexplained pain or swelling in your legs
- chest pain, sudden shortness of breath or coughing up blood

### SEEK MEDICAL ADVICE URGENTLY FROM YOUR GP

## ANY QUESTIONS WHILST IN HOSPITAL?

If you have any questions please ask your doctor, nurse or pharmacist.

After discharge you can contact the Anticoagulation Nurse Specialist on 01553 613613.

## PATIENT ADVICE AND LIAISON SERVICE

If you have any concerns or queries about the hospital, your treatment or need support or assistance, please contact our Patient Advice and Liaison Service. They are here to help.

Tel: 01553 613351

Email: [pals@qehkl.nhs.uk](mailto:pals@qehkl.nhs.uk)

## FURTHER INFORMATION

The following web sites provide reliable information:

[www.dvtsafetyzone.co.uk/](http://www.dvtsafetyzone.co.uk/)

[www.nice.org.uk/](http://www.nice.org.uk/)

[www.patient.co.uk/](http://www.patient.co.uk/)

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## REDUCING THE RISK OF DEEP VEIN THROMBOSIS (DVT) AND PULMONARY EMBOLISM (PE)



Approximately half of all cases of blood clots in the deep veins are associated with hospital admissions, including day surgery. The Queen Elizabeth Hospital is making every effort to reduce this risk to its patients. So please take a few minutes to read the information in this leaflet

Chair: Kate Gordon CB Chief Executive: Patricia Wright  
Patron: Her Majesty The Queen

*The Preferred Hospital for Local People*



## What is Venous Thrombosis?

The body naturally produces a protective blood clotting mechanism to prevent too much blood loss (e.g. due to trauma, an injury or surgery). Clots can also develop if the blood flow through the veins is sluggish because of reduced mobility or prolonged bed rest. Sometimes clots can form for no clear reason, but certain illnesses, diseases and drugs can make the blood more likely to clot.

Going into hospital itself does not cause blood clots. It is generally a combination of risk factors such as:

- acute heart failure
- being overweight
- being over 60 years old
- cancer
- chronic Respiratory disease
- family history of DVT or PE
- Hormone Replacement Therapy (HRT)
- inherited blood disorders such as thrombophilia e.g. factor V Leiden
- infection
- inflammatory bowel disease
- Oral Contraceptive Pill (OCP)
- pregnancy or having recently been pregnant
- previous DVT or PE
- reduced mobility
- surgical operation / procedure
- varicose veins with phlebitis

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## Deep Vein Thrombosis (DVT)

A DVT most commonly develops in the deep veins of the lower leg. Typical symptoms are:

- pain, tenderness, and swelling of the calf
- the calf may become red and warm/hot

## Pulmonary Embolism

Sometimes part of the blood clot from a DVT in the leg can break away (an embolism) and become lodged in one of the arteries in the lungs. Typical signs and symptoms include at least one of the following:

- shortness of breath or needing to breathe rapidly that comes on suddenly with no explanation
- sharp, knife-like chest pain while taking a deep breath
- coughing up blood stained phlegm

## DURING YOUR TIME IN HOSPITAL

The doctors and nurses looking after you will assess your risk for developing a venous thrombosis based on all known risk factors. They will take appropriate preventative measures to reduce your risk of having a DVT or PE. This may include one or more of the following measures:

## Exercise & Mobility

In hospital patients generally spend more time sitting or lying in bed than they would when at home.

This can increase the risk of blood clots forming. Therefore, it is important that you move around as much as possible. Try not to cross your legs when you are sitting or lying down.

## Graduated Compression Stockings

These promote blood flow in the legs and so help reduce risk of DVT. Your legs will be measured to ensure that the correct size is fitted. It is important to remove the stockings daily to check that your skin is not discoloured or red. Make sure the stockings do not roll down as they will then be too tight and will restrict blood flow.

## Compression Devices

These devices involve inflatable cuffs around the calves and are often used during surgical operations/procedures to increase blood flow whilst you are immobilised.

## Heparin Injections

This medication is known as an anticoagulant. It reduces the risk of developing a DVT or PE by making the blood less likely to clot in your veins. Side effects are rare, but they may include bleeding, pain and irritation at the injection site.