VTE Prevention – Hospital Setting

Baseline Rate: 2.74  
Goal: 2.19

1. **Leadership**: Select champions to lead the VTE initiative: including Executive/Senior Leadership, Nursing, Pharmacy, Physicians and Clinical Decision Support.

2. **Prevent**: Develop a multi-disciplinary team that involves front-line staff and providers in the development of the VTE prevention protocol.

3. **Prevent**: Develop a VTE prevention protocol that includes a standardized assessment of VTE and bleeding risk that is tied to recommendations of VTE prophylaxis for each level of risk.

4. **Prevent**: Develop a VTE prevention protocol that reliably detects all patients at risk for developing a VTE and that provides decision support regarding combination mechanical and pharmacological prophylaxis.

5. **Prevent**: Develop a VTE prevention protocol that is simple to use for the end-user and does not require complex calculations, minimizes over-prophylaxis for low risk patients and decreases HA-VTE without any increase in bleeding.

6. **Prevent**: Choose a model to assess VTE and bleeding risk: A Qualitative or Quantitative risk assessment model is the preferred tool over Prompts and Opt Out models.

7. **Mitigate**: Implement a plan for promoting patient mobility upon admission. The plan should have explicit steps that can be individualized to the patient. Trigger reassessment of VTE risks when the patient does not meet ambulation goals.

8. **Mitigate**: Involve the family and patient during discharge planning to ensure they understand the importance of post-discharge VTE prophylaxis, if prescribed. Educate patient and family members on early signs of VTE symptoms and instructions on who to contact.

9. **Performance and evaluation**: Design reliability into VTE prevention processes. Hold physician and nursing staff accountable to established VTE initiatives. Identify outliers and provide customized training to target gaps in knowledge.

10. **Moving towards zero**: Involve Clinical Pharmacy in daily rounds to ensure appropriate VTE prophylaxis. Leverage IT support to identify real time gaps in care and to signal appropriate next steps. Report out VTE metrics to all departments and Senior Leaders.