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*VTE Virtual Learning Series #3:*

## **Preventing VTE: Educating Health Professionals**

### **Hosted by:**

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BC PATIENT SAFETY  
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## Our presenters today:

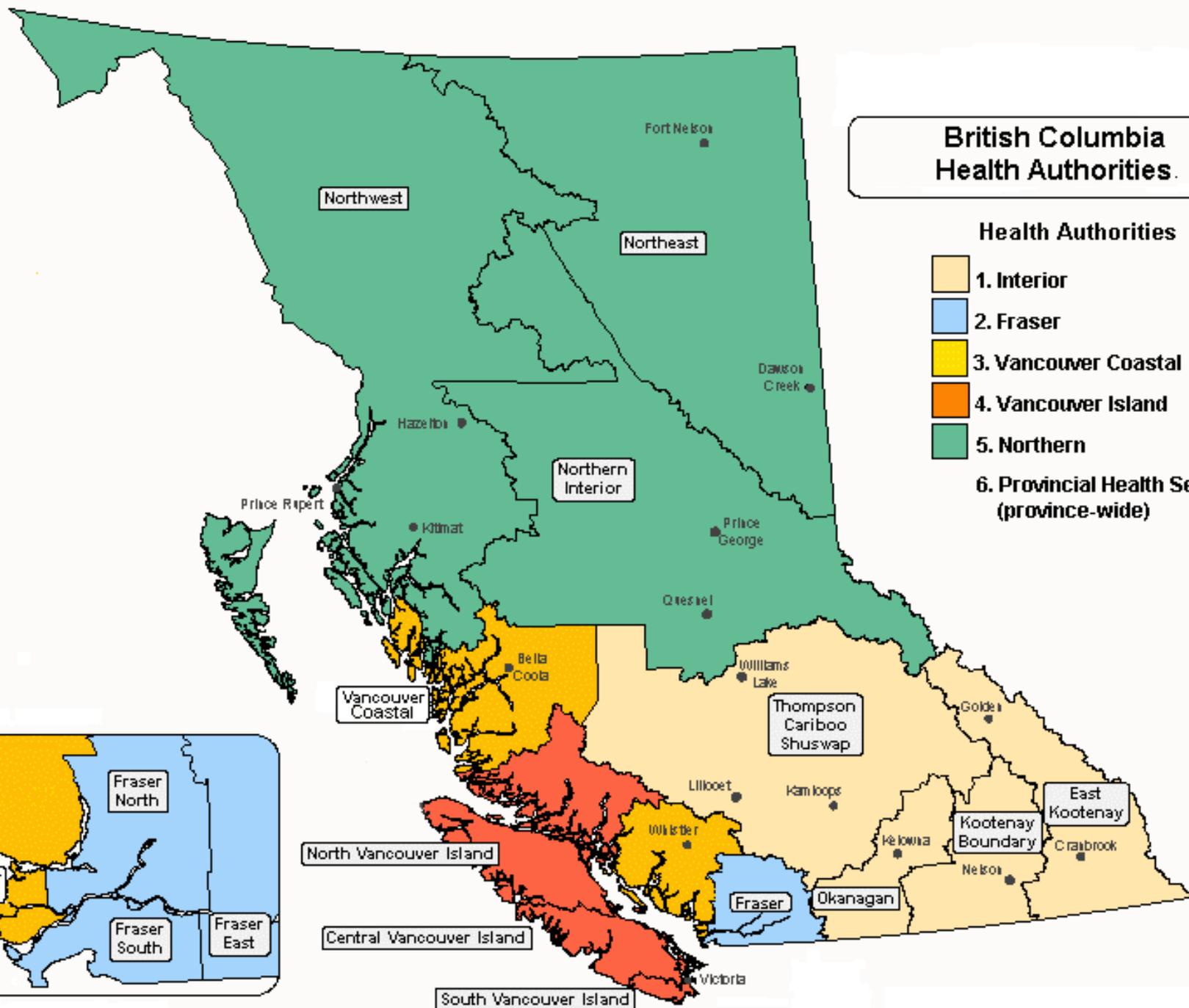
Christine Jerrett, RN BSN

Jennifer Stieda, BSc (Kin) BEd MET

## British Columbia Health Authorities

### Health Authorities

- 1. Interior
- 2. Fraser
- 3. Vancouver Coastal
- 4. Vancouver Island
- 5. Northern
- 6. Provincial Health Service (province-wide)



## Objectives:

1. Understand the rationale for providing VTE education to healthcare professionals.
2. Hear examples of how two local health authorities are approaching the challenge of VTE education.
3. Have an opportunity to ask questions and discuss the challenges your own site is facing in VTE education.

## VENOUS THROMBOEMBOLISM (VTE) PROPHYLAXIS

The team identifies medical and surgical clients at risk of venous thromboembolism (deep vein thrombosis and pulmonary embolism) and provides appropriate thromboprophylaxis.

### GUIDELINES

Venous thromboembolism (VTE) is the collective term for deep vein thrombosis (DVT) and pulmonary embolism (PE). VTE is a serious and common complication for clients. Evidence shows that incidence of VTE can be substantially reduced with appropriate prophylaxis. Evidence-based thromboprophylaxis is generally accepted standard of practice for the prevention of VTE.

The morbidity and financial impact of thromboembolism is well documented. Development of VTE is associated with increased patient mortality, and is the most common preventable cause of hospital death. In addition, both hospital costs and median length of stay are greatly increased for patients developing VTE.

NOTE: This ROP is not a requirement for pediatric hospitals. The ROP applies to clients 18 years of age or older.

### TESTS FOR COMPLIANCE

- The organization has a written thromboprophylaxis policy or guideline.
- The team identifies clients at risk for venous thromboembolism (VTE), [(deep vein thrombosis (DVT) and pulmonary embolism (PE)] and provides appropriate evidence-based, VTE prophylaxis.
- The team establishes measures for appropriate thromboprophylaxis, audits implementation of appropriate thromboprophylaxis, and uses this information to make improvements to their services.
- \*The team identifies major orthopaedic surgery clients (hip and knee replacement, hip fracture surgery) who require post-discharge prophylaxis and has a mechanism in place to provide appropriate post-discharge prophylaxis to such clients.

- The team provides information to health professionals and clients about the risks of VTE and how to prevent it.



# Quality Improvement Resources:

<http://www.impactbc.ca/>



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Clinical Care Management (CCM)

Care of Critically Ill Patients

Hand Hygiene

Heart Failure

Medication Reconciliation

Sepsis

Stroke & TIA

Surgical Checklist

Surgical Site Infections

Venous Thromboembolism (VTE)

Contacts



## venous thromboembolism - VTE

measurements guidelines meetings/events resources

### Our Challenge

Venous thromboembolism (VTE) is a disorder that includes deep vein thrombosis and pulmonary embolism, and is one of the most common preventable complications from hospitalization. Patients who develop deep vein thrombosis can experience pain, swelling, and extreme discomfort. Pulmonary embolism can lead to shortness of breath, chest pain, and death. The majority of hospitalized patients are at risk for developing VTE.

VTE is **preventable**. Establishing methods to provide appropriate thromboprophylaxis to patients based on standardized risk assessments is a safe, cost-effective and efficacious way to prevent VTE in nearly all patient groups.

Providing appropriate thromboprophylaxis for all patients may prevent the pain and discomfort of a thrombus, prevent complications that can extend hospital stays, and even save a life. Our aim is to provide every hospitalized patient in BC with appropriate thromboprophylaxis to help eliminate the incidence of preventable VTE.

Join with us in achieving this goal within your own region, hospital, or unit.

