Deep Vein Thrombosis (DVT) Guide

Signs and Symps – no single feature is diagnostic

- Single limb oedema Most specific
- Leg pain 50% but is nonspecific
- Calf pain on dorsiflexion of the foot (Homan's sign)
- Tenderness of deep veins 75% of patients
- Warmth AND/OR erythema (although blanching is possible)
- A palpable, indurated, cordlike, tender subcutaneous venous segment

Well's Score [DVT]

•	Entire Leg swollen	+1
•	Tender over deep veins	+1
•	Pitting oedema	+1
	(greater in symptomatic leg)	
•	Immobilisation of limb	+1
•	Previous DVT/PE	+1
•	Active Cancer	+1
•	Bed Ridden	+1
	(over 3 days within last 4 weeks)	
•	Collateral superficial veins	+1
	(non-varicose)	
•	Calf swelling >3cm	+1
	(in symptomatic leg)	
•	Alternative diagnosis	-2
	(equally or more likely than DVT)	

Actions

- Well's <2 (Low risk DVT)
 - D-Dimer -ve, no further action
 - D-Dimer +ve, treat as High risk
- Well's <u>></u>2 (High risk DVT)
 - Request and Urgent Ultrasound
 - Suitable for ambulatory care?
 - Yes: start Rivaroxaban
 - No: Refer to MAU/AAU

Rivaroxaban

(If appropriate for Ambulatory)

- 15mg BD
- 3 x weekly post dated scripts
- Give patient "Advice sheet" attached
- Inform GP on discharge letter

Differentials

- Cellulitis
- Baker's cyst rupture
- Limb injury
- Mass effect
- Nephritic syndrome
- CCF

Investigation

- FBC
- Renal function
- Liver function
- CRP
- Clotting
- D-Dimer

Ambulatory Vs. MAU (MAU if any of following)

- <18yrs
- Pregnant/Post-<u>partum/Lactating</u>
- Suspected PE
- Hypertension (SBP >180 OR DBP >115)
- CKD 5 (eGFR <15)
- Liver Failure
- Bleed Risk

 (e.g. Oesophageal varices, major surgery, major trauma, intracranial bleed <4/52 etc.)
- Allergy to Rivaroxaban

(Above are the contraindications to Rivaroxaban)

RIVAROXABAN INFORMATION FOR PATIENTS

Why have I been prescribed Rivaroxaban [Xarelto®]?

Your doctor has prescribed you Rivaroxaban because you might have developed a blood clot (thrombosis) in the deep veins of your leg. This is known as a Deep Vein Thrombosis or DVT.

A blood clot can form for many reasons. It can cause problems if it grows or moves. Rivaroxaban is an anticoagulant medicine that you need to take to help the clot dissolve. It reduces the risk that the blood clot can cause problems. Anticoagulants are drugs that slow down your blood clotting process. Some people will refer to them as blood thinners however the blood is not actually thinned, it just takes longer to clot while you are taking anticoagulants.

The dose you have been prescribed is 15mg. You need to take this twice daily until your doctor lets you know the results of the hospital scan which is being arranged. It is important that you start taking this tablet today. When you receive your medicine read the information leaflet in the pack. If you have any questions ask your pharmacist.

How do I get the Rivaroxaban medication?

Take the prescription that your doctor has given you to your pharmacist (chemist), they should have this medicine in stock. If they do not they can usually order it to arrive the same day, but if it is late in the afternoon you may need to go to another pharmacist.

What will happen next?

Your doctor thinks you might have a clot in the veins of your leg.

- You have been referred for an ultrasound scan. The results of the scan will be sent to your GP.
 - **Important:** If you have not had the date of your scan confirmed within 3 days please ring the Ultrasound department on 01484 342757 Monday to Friday, 8.30am to 4.30pm
 - The Ultrasound department is located in Lower ground floor at Huddersfield Royal Infirmary (HRI) in the Radiology department.

If the scan is Negative - no DVT seen

- If the scan does not show a DVT, then you will be advised to stop taking the treatment (Rivaroxaban).
- If the scan does not show a DVT but you have other risk factors you will <u>may</u> need a second scan in one week. You will be advised to stop taking Rivaroxaban between scans. Your GP will arrange a second scan for you if required.

If the scan is Positive – DVT seen

- If the scan shows that you do have a DVT then you should continue taking Rivaroxaban at 15mg twice daily for a total of 21 days and no longer. Then you should start the next prescription that is 20mg once daily, this will be arranged by your GP.
- Some patients with DVT will be managed by their own GP however others may need to be made an appointment to be seen in the Thrombosis Clinic in the hospital and if this is the case in your situation you will be made an appointment at the clinic usually within 3 weeks. This will be done at the time of your scan and the scan department will advise you if you are being referred to the Thrombosis Clinic.

If you have any questions regards the above please contact your GP

You should seek medical help immediately if you experience ANY of the following:

- You have increasing pain, swelling or blue discolouration in your leg.
- You become short of breath.
- You feel pain in your upper back or chest
- You cough up blood.