Deep Venous Thrombosis Prophylaxis in the Surgical Patient

Risk of bleeding outweighs risk of DVT?

NO

Traumatic brain injury?

NO

Solid organ injury?

NO

Trauma or Burn?

Yes

Enoxaparin 40 mg SubQ daily + SCD’s
(CrCl ≤ 30 ml/min use heparin 5,000 units SubQ TID)

NO

Apply SCD’s

Reassess for decrease bleeding risk

Place Angel Catheter*

See VTE prophylaxis in TBI guideline

At 24 hours or when no signs of active bleeding, Enoxaparin 30mg SubQ BID**
(CrCl ≤ 30 ml/min use heparin 5,000 units SubQ TID)

*Indications for IVC filters (Retrievable)
1. Proximal DVT + contraindication to anticoagulation (Angel catheter if short term contraindication)
2. PE on anticoagulation
Consider IVC filter for those who cannot take anticoagulation + high risk for PE.

**This includes patients with an ICP monitor and/or ventriculostomy without bloody output.

** If BMI >30, give enoxaparin 0.5mg/kg/dose BID.

References

