

Inpatient DVT Prophylaxis for Orthopedic Injuries (excludes spine):

DVT Prophylaxis for Ortho fractures	Preoperatively	Day of Operation		Postoperatively
^^spine surgery – hold for 48 hours	Lovenox 30 mg BID if BMI < 40 Lovenox 0.5 mg/kg BID if BMI ≥ 40	Hold DVT Prophylaxis the Morning of Surgery	Can restart Lovenox at 30 mg BID Dose 12 hours post-op for all weights for 24 hours **consider changing the timing of the dose to ensure lovenox is given postop	After 24 hours post op can adjust DVT prophylaxis to weight base dosing if BMI >40 or start full anticoagulation if needed

Discharge Orthopedic Trauma DVT Prophylaxis:

In conjunction with the trauma service, orthopedic trauma service and MHS6 geri-trauma service, discussion for DVT prophylaxis on discharge should be given for the following patients regardless of weight bearing status or discharge destination:

- Hip fractures
- Acetabulum fractures
- Pelvic fractures
- Femur fractures
- Tibial plateau fractures
- Other fractures in lower extremities that result in weight bearing restrictions should be considered for DVT prophylaxis at discharge.

Medication Choice and Dosing:

Preferred:

ASA 81mg BID (please note the dose and frequency)

Alternative:

Lovenox 30 mg BID for patients BMI < 40 or 0.5 mg/kg BID for patients BMI ≥ 40

Heparin 5000 units sq TID (for patients with renal insufficiency)

Patients with the following are not candidates for ASA and should receive lovenox/heparin:

- Patients with bilateral Lower extremity fractures resulting in non-weight bearing status
- Patients age 65+ non-weight bearing in a single lower extremity
- Patients with acetabular/pelvic fractures requiring operative intervention
- Patients with prior history of DVT/PE not on full anticoagulation

Considerations:

For patients already on full anticoagulation, continue full anticoagulation when deemed stable from trauma/operative standpoint.

For patients who take antiplatelets as a home med consider the following:

1. If on ASA 325, continue
2. If on dual antiplatelet (ASA, Plavix), continue
3. If on Plavix alone, add ASA 81 BID for the 21 day to intensify platelet inhibition in lieu of LMWH

Timing:

21 days of therapy to be initiated at the time of discharge. If therapy is to continue it will be addressed and continued at the outpatient orthopedics appointment