

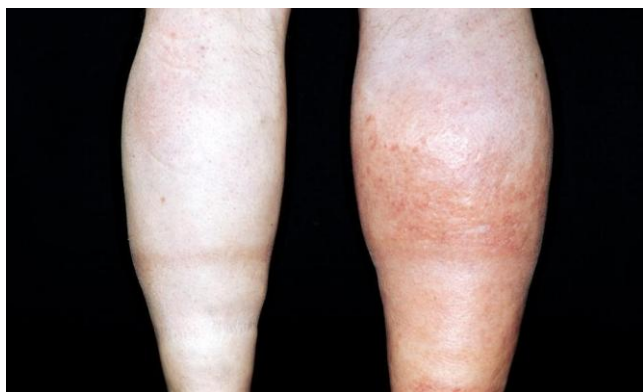
Advice for patients following Venous thromboembolism (VTE) – a blood clot.

You have received treatment for Venous Thromboembolism (VTE). Every year, thousands of people in the UK develop a blood clot.

What is venous thromboembolism (VTE)?

Venous Thromboembolism (VTE) is a condition in which a blood clot forms, most often in the deep veins of the leg, groin or arm, known as Deep Vein Thrombosis, (DVT).

These clots may break free and travel in the blood, lodging in the lungs, known as Pulmonary Embolism, (PE). Together, DVT and PE are known as venous thromboembolism (VTE).



NHS (www.nhs.uk)

Symptoms of DVT (deep vein thrombosis) in the leg are:

- Pain and tenderness in the leg (rarely both legs), usually in the calf or thigh.
- swelling in 1 leg (rarely both legs)
- warm skin around the painful area
- red or darkened skin around the painful area – this may be harder to see on brown or black skin

Symptoms of PE (Pulmonary Embolism) are:

- Unexplained shortness of breath
- Chest Pain that is worse when you breathe
- Coughing up blood

Other blood clots:

Sometimes a blood clot can happen in a vein in another part of your body, although this is very rare.

Call 999 or go to A&E if:

You have symptoms of DVT (Deep Vein Thrombosis), such as pain and swelling or a PE (Pulmonary Embolism) such as breathlessness or chest pain.

Treatment

Blood-thinning medicines, called anticoagulants.

- You may have been given an injection of a blood-thinning medicine while awaiting test results.
- [anticoagulant medicine](#) stops blood clots getting bigger and prevents new clots forming.
- You will need to take these for at least 3 months. **It is particularly important that you take these medicines correctly.**

Low Molecular Weight Heparin (e.g., Dalteparin) before a confirmation scan.

You may have an injection of a blood-thinning medicine called Dalteparin while you are waiting for a scan to see if you have a DVT (Deep Vein Thrombosis), or a PE (Pulmonary Embolus).

Direct oral anticoagulant tablets (DOACs) for example Apixaban, Rivaroxaban, Edoxaban and Dabigatran.

DOACs are anticoagulant medicines which are taken by mouth. You will get an initial supply of the DOAC from the SDEC (Same Day Emergency Care) team usually through the hospital pharmacies. It is VERY important you do NOT run out of these medicines or stop them until told to do so by a healthcare professional.

Warfarin

Warfarin are tablets which are taken by mouth once a day. You will need to have regular blood tests while taking warfarin to make sure your dose is right.

Warfarin can take some time to take effect so you will need to have injections of Low Molecular Weight Heparin (a rapid working anticoagulant) until the warfarin begins to take effect. You will usually be provided with at least 7 days of Low Molecular Weight Heparin and 3 different strengths of warfarin from SDEC (Same Day Emergency Care).

You will be referred to the anticoagulation service who will contact you to arrange for you to have a blood test. It is VERY important you do not miss your blood tests or stop taking you warfarin unless told to do so by a healthcare professional.

If you have any questions or concerns, or you have not been contacted by the anticoagulation service, please contact them on 01494 323 600 (Option 1).

Low Molecular Weight Heparin Injections (e.g Dalteparin)

In some cases, you may be prescribed Low Molecular Weight Heparin injections only. You will usually be provided with at least one month's supply of these.

It is important that you do not run out of injections. Your GP will not normally give a prescription for these injections so you will need to return to the hospital for more.

Contact your consultant to continue to provide get these through the hospital pharmacies.

- **Surgery (Thrombectomy).**
 - This is to remove blood clots. Occasionally patients are referred for mechanical removal of blood clots.

If you get a DVT when you're pregnant, you'll have injections for the rest of the pregnancy and until your baby is 6 weeks old.

During your recovery

To help your recovery from Deep Vein Thrombosis (DVT):

- Walk regularly
- Keep your affected leg raised when sitting
- If you still have swelling in your affected leg after 4 weeks, discuss compression stockings with your GP.
- Delay any flights or long journeys until at least 2 weeks after you start taking blood-thinning medicines.

To help your recovery from Pulmonary Embolism (PE):

- Gradually increase your activity levels back to normal.
- If you smoke, do your best to give up:
 - View general advice about quitting: www.nhs.uk/live-well/quit-smoking/nhs-stop-smoking-services-help-you-quit/
 - Get local support to help you stop:
 - Be healthy Bucks: <https://bhb.maximusuk.co.uk>
- You should make a full recovery from a pulmonary embolism if it's spotted and treated early. Most patients begin to feel much less breathless around 2 weeks after treatment and recover by 12 weeks.

What happens next

The anticoagulation service will contact you within 7 days to check how you are managing the medication you have been given.

If you have any questions or concerns or you have not been contacted by the anticoagulation service, please call them on **01494 323 600** (option 1).

Further information

- **Trust website:** You can find more information about treatment and support for your condition on the Anticoagulation page of the Trust website:
www.buckshealthcare.nhs.uk/our-services/anti-coagulation-monitoring/
- **NHS website:** Visit www.nhs.uk to find out about symptoms, treatment and how to reduce your risk of developing venous thromboembolism.
 - www.nhs.uk/conditions/deep-vein-thrombosis-dvt/
 - www.nhs.uk/conditions/pulmonary-embolism/
- **Thrombosis UK:** The charity has a wealth of useful resources [and information, including some fantastic videos](#) – visit www.thrombosisuk.org

Call 999 or go to A&E if you have symptoms of DVT (Deep Vein Thrombosis), such as pain and swelling or PE (Pulmonary Embolism) such as breathlessness or chest pain.

For general medical advice please use the NHS website www.nhs.uk, the NHS 111 phone line, or your GP.

Medicines Advice is available to you via our pharmacy Patient Helpline on 01296 838220 or you can email bucks.medicinesresourcecentre@nhs.net to contact the helpline team Mon to Fri 9am to 4pm.

How can I help reduce healthcare associated infections?

Infection prevention and control is important to the wellbeing of our patients so we have procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections.

You, and anyone visiting you, must use the hand sanitiser available at the entrance to every ward before coming in and after you leave. You may need to wash your hands at the sink using soap and water. Hand sanitisers are not suitable for dealing with patients who have symptoms of diarrhoea.

More help or advice

Contact our patient advice and liaison service (PALS) on 01296 831120 or bht.pals@nhs.net

About our patient information

We aim to make the information as up to date and accurate as possible, but please note that it's subject to change. You must always check specific advice on any concerns you may have with your doctor.