

## What can I do to lower the chances of getting a DVT?

### To help reduce the risk of a DVT you can:

- exercise regularly; and
- maintain a healthy weight.

### During your hospital stay it is important that you

- mobilise as soon as possible
- commence leg exercises such as bending your feet up and down
- ensure adequate hydration

### In Hospital

If mobilisation is delayed you may need:

- A foot compression system, which includes a controller and a pair of foot covers which wrap around your feet, similar to shoes. Through intermittent inflation, these squeeze the bottom of each foot. These foot covers help to move blood in your legs back to your heart by mimicking the effects of walking. This treatment is important and will lessen the risk of blood clot and reduce swelling.

AND / OR

- TED anti embolism stockings apply clinically proven graduated pressure. This promotes increased blood flow in your legs.

### If you are required to wear TED's when discharged from hospital:

- Remove stocking daily, inspect skin and reapply stockings.
- Do check proper heel/gusset placement.
- Do NOT use ointments. Use talcum powder.

- Machine wash TED's every 2-3 days (temperature not to exceed 71°C. With correct care stockings will last 2-3 months.
- Get re-measured with increase/decrease in weight. eg. swelling

### IF YOU HAVE ANY QUESTIONS OR CONCERNS PLEASE SEE YOUR NURSE FOR ASSISTANCE.

You may be commenced on drugs that help prevent blood clots, eg aspirin, clexane. You will be advised if this is to be continued when discharged from hospital, and if you need follow-up care from your GP



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# DEEP VEIN THROMBOSIS (DVT)

## Information for Patients

A deep-vein thrombosis (DVT) is a blood clot in a vein, usually in the leg.

This leaflet explains:

- what a DVT is
- who might be more likely to get a DVT
- how you can tell if you might have a DVT
- what to do if you think you have a DVT
- what treatment there is for a DVT
- how you can lower your chances of getting a DVT while in hospital and after discharge

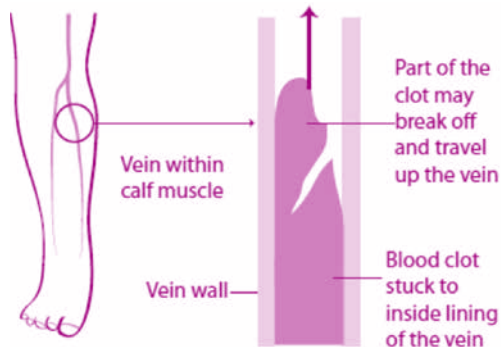


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## What are DVT & Pulmonary embolus?

A DVT is a blood clot which forms in a vein, usually in the leg. Veins take blood back to your heart from every part of the body.

Although veins in the leg are a common place for DVT, other veins can be affected, for example in your stomach. The blood clot forms in a vein deep inside your leg. You cannot see these veins on the surface of your leg.



If someone has a DVT, part of the blood clot could break off and travel in the bloodstream.

It keeps travelling until it gets stuck somewhere, almost always in the lung. This is called a pulmonary embolus (PE). This is an extremely serious condition and requires immediate treatment. It is important to know the warning signs of a DVT, so the blood clot can be treated before it travels to your lungs.

## What are the warning signs of a DVT?

**Typical symptoms usually include:**

- Pain in one leg which is worse when your leg is pressed
- Your leg becoming warm and red
- Swelling in your leg

Usually only one leg is affected at any one time, however DVT can affect both legs.

If the clot is small and has travelled to your lungs, you may not feel anything in your chest.

A bigger clot may cause pain in your chest and may make it harder to breathe.

Other symptoms of PE are coughing up blood and collapsing for no obvious reason.

### WHAT SHOULD I DO IF I HAVE THESE WARNING SIGNS?

**Arrange to see your GP immediately;  
OR  
Go to your local accident and  
emergency department (casualty).**

#### What tests will I get?

To help the doctor decide if you have a DVT or PE, you will be asked a series of questions, and examined.

**Your Doctor may then suggest the following tests to be carried out as soon as possible:**

- A blood test
- An ultrasound scan, if DVT is suspected
- A lung scan and chest X-ray, if PE is suspected

These tests are reliable but, as with all investigations, they are not always 100% accurate.

It may be suggested that you have another ultrasound scan after a few days. If the tests are negative but you are still having the symptoms, or they come back, you should see your GP or go to accident and emergency.

## What is the treatment for DVT & PE?

The usual treatment for DVT is a medicine (such as clexane or warfarin) to break down the blood clot.

**The aim of the medicine is to:**

- Stop the blood clot getting bigger and breaking off and travelling to your lungs
- Prevent a DVT from happening again in the future
- Prevent further pulmonary emboli from developing

You may also wear compression stockings to reduce the swelling and improve the chance of your leg returning to normal.

## Who is more likely to get a DVT?

**Anyone can get a DVT, but you are more at risk if you:**

- Or anyone in your family has had a DVT before
- Have had an operation recently (within the last three months)
- Are not able to move about as much as usual, for example, if you have an injury or illness or have had surgery which stops you moving around
- Have been unable to move around on a long journey by car, plane or train (more than four hours continuous travelling)
- Have a medical condition that causes your blood to clot more easily (thrombophilia)
- Are on the combined oral contraceptive (the pill) or HRT
- Are pregnant or have had a baby in the past six weeks
- Have cancer
- Have some types of heart disease or blood disorders; or
- Are overweight