

717 The Introduction of a Discharge Letter Proforma For Hip Fracture Patients Improves Compliance with VTE Prophylaxis Prescription on Discharge: A Closed Loop Audit

C. Williamson, C. Brennan

Royal Infirmary Edinburgh, Edinburgh, United Kingdom

Introduction: Venous thromboembolism (VTE) is a significant cause of morbidity and mortality in inpatients; with those undergoing lower limb surgery at particularly high risk. NICE recommends that Low Molecular Weight Heparin (LMWH) or Fondaparinux should be used for VTE prophylaxis for one month following hip fracture. Our local policy is to prescribe Dalteparin for 30 days following surgery.

Method: A closed loop audit of VTE prophylaxis on discharge for 193 patients with hip fractures was performed. The first audit cycle established whether VTE prophylaxis was being prescribed in line with departmental policy. Following this, a template discharge letter was introduced which included a prompt for appropriate prescription of VTE prophylaxis.

Results: Initially, data for 93 consecutive patients was collected. It was found that 13% had not received VTE prophylaxis in line with guidelines. Of these, six patients had no documented contraindication or alternative prophylaxis prescribed. Results were disseminated locally.

After introduction of the template discharge letter, data for 100 consecutive patients was collected. Re-audit showed a marked improvement in adherence to local policy with 95% of patients now receiving appropriate VTE prophylaxis on discharge.

Conclusions: Introduction of a template discharge letter prompts the documentation of contraindications to prophylaxis and improves compliance with local policy.