



Deep Vein Thrombosis (DVT) – blood clots

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Version 6

About this leaflet

The purpose of this leaflet is to give you information about Deep Vein Thrombosis (DVT), which is also known as Blood Clots. This does not replace any information or advice we may give you in person. If you have any questions, please speak to any member of your care team.

The information contained in this leaflet is based on guidance published in the Scottish Intercollegiate Guidelines Network (SIGN) guideline number 122, 'Prevention and Management of Venous Thromboembolism' available at: www.sign.ac.uk

What is a DVT and how do you treat it?

A DVT is a blood clot, which can occur following surgery, an injury to the limb or from periods of immobility (e.g. prolonged bed rest or cramped travelling conditions). Sometimes a clot can develop for no apparent reason.

The clot, or DVT, usually forms in the deep veins within the legs, but it can happen elsewhere in the body too. Generally the blood clot will remain attached to the vein wall. However it could separate and travel in the blood stream through the heart to the lungs. This is called a pulmonary embolus (PE); these are not common but can be life threatening and require urgent medical attention.

Risks of developing a DVT

Am I at risk of developing a blood clot?

Everyone can be at risk of developing a blood clot. Some people are at higher risk at certain times in their life, such as when pregnant or being admitted to hospital. Sometimes it can happen for no reason at all.

Please ask a member of your health care team if you have been assessed.

Am I still at risk when I leave hospital?

It is still possible that you could be at risk of developing a clot when you leave hospital, therefore you should continue to follow the advice given to you by your health care team.

If you experience any of the symptoms listed below, please contact your GP immediately.

Signs and symptoms: how will I know if I develop a DVT?

Tell your health care team immediately if you experience any of the following symptoms, as these may indicate the presence of a clot:

- Tight, throbbing pain in the leg (usually the calf).
- Swelling of the legs or arms (either new, or swelling that is getting worse).
- Any redness/discolouration or heat in the calf or leg or arm.
- Severe shortness of breath.
- Coughing up blood / blood in your spit.
- Fast heart beat.
- Sharp pain in the chest or ribs, which worsens on breathing.
- Dizziness.

Prevention and treatment

Are there any preventative treatments?

You may have one or more of the following preventative treatments:

- Oral or injected **anticoagulation medication**.
- **Compression Stockings** worn whilst lying in bed and during the day supports the muscle and constricts the diameter of the veins, allowing blood to flow more easily.
- **AV boots** are worn overnight while in bed, and if immobile for lengthy periods, compressing the soles of the feet and maintaining circulation. (Orthopaedic surgery patients only.)
- **Physiotherapy** will help you stand and walk after your surgery, aiding your recovery.

What can I do to help reduce my risk of developing a clot?

When you come into hospital, your health care team should tell you if you are at risk. The following will help you to reduce this risk:

- Follow any instructions that you have been given about medication that has been prescribed for you.
- Continue to wear your compression stockings as directed; if these fall down, or are too tight, inform a member of your health care team.
- Avoid long periods of immobility: get up and about (when advised that it is safe to do so) and do any exercises recommended to you – aim for gentle exercise to keep the circulation in the legs moving.
- When sitting, perform calf exercises or elevate your legs on a cushion (take care not to sit in the same position for too long).
- Do not stand for prolonged periods.
- Drink plenty of water, unless advised not to by your health care team.
- Stop smoking. If you need help to stop smoking contact your local Practice Nurse or ask to be referred to the Smoking Cessation Service. Please note: Smoking, including e-cigarettes, is prohibited in all hospital buildings, vehicles and grounds.

Further advice and information

While in hospital a member of the nursing or medical staff should be able to answer any of your questions.

If you have any complications or adverse symptoms, please let a member of staff know immediately.

When you go home, please contact your GP, Practice Nurse or NHS24 for advice if required.

If you need further assistance or have any questions, please contact the Surgical Admissions and Recovery Unit (SAU) via the switchboard on **0141 951 5000** during Monday to Friday 7am to 8.30pm.

Out of hours you should contact the Senior Nurse via the switchboard.

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 : **0141 951 5513**