

Emergency Services

Deep Vein Thrombosis (DVT)

Deep vein thrombosis (sounds like throm-bow-sis), is a blood clot that forms inside one of the larger veins of the body. You may also hear it called DVT. This type of blood clot usually occurs in the calf, thigh, or pelvis. The blood clot can block part or all of the blood flow. The area becomes inflamed, causing pain, swelling, and feels warm to the touch.

The clot can cause a serious problem if it breaks loose. If the clot gets stuck in a vein in the lungs, it can be life-threatening. This is called a pulmonary embolism (sounds like em-bow-liz-um).

How do you know when you have a DVT?

We suspect you have a DVT. The only way to know for sure is for you to have an ultrasound test**. This test measures the blood flow through your veins and helps locate any clots that might be blocking the flow.

You **must have this test done so we can make sure you are treated properly.

Your ultrasound appointment:

Where: _____

When: _____

How we treat DVT

Even though we cannot confirm you have a DVT until the ultrasound test is done, we treat you right away with a dose of a blood thinning medication. The blood thinning medication is given as an injection. This medication reduces the chance of any blood clot getting larger, or of a clot travelling into your lungs.

The blood thinning medication we give you is called 'Enoxaparin' (sounds like ann-ox-ah-pair-in) or 'Dalteparin' (sounds like doll-teh-pair-in).

You must come back every day for this injected medication until we get the results of your ultrasound.

If the ultrasound confirms you do have a DVT, we continue giving you an injection of the blood thinning medication every day for up to 7 days, or until your blood is thin enough that we can switch you to a blood thinner pill called 'Warfarin'. Once the pills start working, you will not need any more injections.

Everyday you come back to our Emergency Department, you have a blood test to measure the time it takes for your blood to clot. This test is called an INR (stands for 'International Normalized Ratio'). The results of the test are used to adjust the dose of the blood thinner.

Deep Vein Thrombosis - *continued*

How we treat DVT (*continued*)

You must continue to take Warfarin for at least 3 months to prevent existing clots from growing.

During this time:

- You must see your family doctor regularly.
- You must have blood tests to check your blood clotting. Your doctor will tell you how often you need to come into the office and have your blood tested.

(There are other medications that can be used instead of Warfarin that do not require regular blood tests. Talk with your family doctor to see if they are right for you.)

How to care for yourself at home

Rest your swollen leg up on pillows to help reduce the swelling.

You can take acetaminophen (Tylenol) for the pain.

Do not take aspirin (ASA) or ibuprofen (Advil, Motrin). These medicines increase the chance of bleeding.

When you take anticoagulants, you need to take extra steps to prevent falls or injuries. You will bleed easily and it is harder to stop the bleeding once you are injured.

It is very important that you:

- Go to all of your scheduled appointments.
- Take your blood thinner medication as directed.
- Go for your regular blood tests.

Go to the nearest Emergency Department if:

- You feel lightheaded or dizzy.
- Your urine (pee) is red or brown in colour.
- Your bowel movement (poo) is red or black in colour.
- Bruises appear without a cause or an existing bruise continues to get bigger.
- You get a cut and it does not stop bleeding after 10 to 15 minutes of direct pressure.
- You are coughing up blood.
- You have increased pain in the area around the DVT.
- The swelling or redness around the DVT gets worse.
- The skin below the area of the DVT becomes cold, white, or blue.
- You have a headache that does not go away with pain medicine.
- You have abdominal (stomach) pain.

Call 9-1-1 right away if:

- You are suddenly short of breath and/or you have chest pain.
- You are coughing up blood.
- You feel faint or pass out.

To learn more, it's good to ask:

- Your family doctor
- Your pharmacist
- HealthLinkBC 8-1-1 (or 7-1-1 for deaf and hearing impaired) or go online to www.HealthLinkBC.ca