

# Caprini VTE Risk Assessment

**Each Risk Factor Represents 1 Point**

<input type="checkbox"/> Age 41-60 years	<input type="checkbox"/> Acute myocardial infarction
<input type="checkbox"/> Swollen legs (current)	<input type="checkbox"/> Congestive heart failure (<1 month)
<input type="checkbox"/> Varicose veins	<input type="checkbox"/> Medical patient currently at bed rest
<input type="checkbox"/> Obesity (BMI >25)	<input type="checkbox"/> History of inflammatory bowel disease
<input type="checkbox"/> Minor surgery planned	<input type="checkbox"/> History of prior major surgery (<1 month)
<input type="checkbox"/> Sepsis (<1 month)	<input type="checkbox"/> Abnormal pulmonary function (COPD)
<input type="checkbox"/> Serious Lung disease including pneumonia (<1 month)	
<input type="checkbox"/> Oral contraceptives or hormone replacement therapy	
<input type="checkbox"/> Pregnancy or postpartum (<1 month)	
<input type="checkbox"/> History of unexplained stillborn infant, recurrent spontaneous abortion (≥ 3), premature birth with toxemia or growth-restricted infant	
<input type="checkbox"/> Other risk factors _____	<b>Subtotal:</b>

**Each Risk Factor Represents 5 Points**

<input type="checkbox"/> Stroke (<1 month)	<input type="checkbox"/> Multiple trauma (<1 month)
<input type="checkbox"/> Elective major lower extremity arthroplasty	
<input type="checkbox"/> Hip, pelvis or leg fracture (<1 month)	
<input type="checkbox"/> Acute spinal cord injury (paralysis) (<1 month)	
	<b>Subtotal:</b>

**Each Risk Factor Represents 2 Points**

<input type="checkbox"/> Age 61-74 years	<input type="checkbox"/> Central venous access
<input type="checkbox"/> Arthroscopic surgery	<input type="checkbox"/> Major surgery (>45 minutes)
<input type="checkbox"/> Malignancy (present or previous)	
<input type="checkbox"/> Laparoscopic surgery (>45 minutes)	
<input type="checkbox"/> Patient confined to bed (>72 hours)	
<input type="checkbox"/> Immobilizing plaster cast (<1 month)	
	<b>Subtotal:</b>

**Each Risk Factor Represents 3 Points**

<input type="checkbox"/> Age 75 years or older	<input type="checkbox"/> <b>Family History of thrombosis*</b>
<input type="checkbox"/> History of DVT/PE	<input type="checkbox"/> Positive Prothrombin 20210A
<input type="checkbox"/> Positive Factor V Leiden	<input type="checkbox"/> Positive Lupus anticoagulant
<input type="checkbox"/> Elevated serum homocysteine	
<input type="checkbox"/> Heparin-induced thrombocytopenia (HIT)	
<i>(Do not use heparin or any low molecular weight heparin)</i>	
<input type="checkbox"/> Elevated anticardiolipin antibodies	
<input type="checkbox"/> Other congenital or acquired thrombophilia	
If yes: Type _____	
<b>* most frequently missed risk factor</b>	
	<b>Subtotal:</b>

**TOTAL RISK FACTOR SCORE:**  

Total Risk Factor Score	Risk Level	Incidence of DVT	Prophylaxis Regimen
0-1	Low Risk	2%	<input type="checkbox"/> Early ambulation
2	Moderate Risk	10-20%	Choose the following medication <b>OR</b> compression devices: <input type="checkbox"/> Sequential Compression Device (SCD) <input type="checkbox"/> Heparin 5000 units SQ BID
3-4	Higher Risk	20-40%	Choose <b>ONE</b> of the following medications +/- compression devices: <input type="checkbox"/> Sequential Compression Device (SCD) <input type="checkbox"/> Heparin 5000 units SQ TID <input type="checkbox"/> Enoxaparin/Lovenox: <input type="checkbox"/> 40mg SQ daily (WT < 150kg, CrCl > 30mL/min) <input type="checkbox"/> 30mg SQ daily (WT < 150kg, CrCl = 10-29mL/min) <input type="checkbox"/> 30mg SQ BID (WT > 150kg, CrCl > 30mL/min) <i>(Please refer to Dosing Guidelines on the back of this form)</i>
5 or more	Highest Risk	40-80%	Choose <b>ONE</b> of the following medications <b>PLUS</b> compression devices: <input type="checkbox"/> Sequential Compression Device (SCD) <input type="checkbox"/> Heparin 5000 units SQ TID <b>(Preferred with Epidurals)</b> <input type="checkbox"/> Enoxaparin/Lovenox <b>(Preferred):</b> <input type="checkbox"/> 40mg SQ daily (WT < 150kg, CrCl > 30mL/min) <input type="checkbox"/> 30mg SQ daily (WT < 150kg, CrCl = 10-29mL/min) <input type="checkbox"/> 30mg SQ BID (WT > 150kg, CrCl > 30mL/min) <i>(Please refer to Dosing Guidelines on the back of this form)</i>

- o MUST wait 24 hours before starting Enoxaparin if patient has epidural catheter
- o D/C Enoxaparin 10-12 hours prior to removing epidural catheter
- o May restart Enoxaparin 24 hours after epidural catheter has been removed.

**NON-PREGNANT PATIENTS**

Body weight < 150kg, CrCl > 30mL/min: **Enoxaparin 40mg SQ daily**  
 Body weight < 150kg, CrCl = 10-29mL/min: **Enoxaparin 30mg SQ daily**  
 Body weight > 150kg, CrCl > 30mL/min: **Enoxaparin 30mg SQ BID**

**MONITORING RECOMMENDATIONS**

- Patients who are obese (actual body weight > 150 kg)
- Patients who are pregnant
- Patients with renal insufficiency (creatinine clearance < 30 ml/min)

Indication	Desired Level (Draw 4 hours after the 4 <sup>th</sup> dose)	Recommendations for Dose Alteration		
		Anti-factor Xa Level (units/ml)	Dose Adjustment	Repeat Anti-factor Xa To Be Obtained
Prevention of DVT/PE	0.2 to 0.5 units/ml	< 0.2	Increase by 25 %	4 hours after 4 <sup>th</sup> dose
		0.2 to 0.5	No change	Repeat in 1 week, then monthly thereafter
		0.6 to 1	Decrease by 20 %	4 hours after 4 <sup>th</sup> dose
		> 1	Hold for 3 hours, then decrease next dose by 30%	4 hours after 4 <sup>th</sup> dose

**Ideal Body Weight**

IBW, men = 50 kg + 2.3 (inches > 5 feet)  
 IBW, women = 45.5 kg + 2.3 (inches > 5 feet)