Trust Wide Audit of Appropriate Thromboprophylaxis, December 2025 Report for Divisions

Summary

1. The audit was performed across all Divisions at the beginning of December 2025. Ward pharmacists were trained in VTE risk assessment and undertook an audit of approximately 10 patients per key clinical area/ward (376) patients across the Trust.

2. The audit evaluated whether a patient was prescribed and receiving 'appropriate thromboprophylaxis (TP)' according to pharmacist assessment. The details of any patient who was not considered to be receiving appropriate TP were immediately fed back to the ward team for review.

3. **The audit demonstrated patients receiving appropriate TP, with overall 98.4% of patients receiving appropriate TP (Medical 98.6% & Surgical 98.1%). Obstetrics were not included in this audit.** Analysed across divisions, appropriate TP was reported as: Neurosciences, Orthopaedics, Trauma, Specialist Surgery, Children & Neonatal (NOTSSCaN) 98.9%, Medicine, Rehabilitation & Cardiac (MRC) 97.5%, Surgery, Women`s and Oncology (SUWON) 98.9 % and Clinical Support Services (CSS) 100%. The target for appropriate TP is >95%, with an aim that all OUH in-patients receive appropriate TP. *Note overall appropriate TP was December 2023 98.6%, 97.9% December 2024 & December 2025 96.5%.*

4. **The audit demonstrates sustained levels of prescribing mechanical TP when appropriate (Anti-Embolism Stockings (AES) and Intermittent Pneumatic Compression (IPC):** NOTSSCaN 96.9%, MRC 100%, SUWON 100% & CSS 100%. IPC and AES are classified as medical devices and should therefore be prescribed.

5. The NICE VTE prevention guidelines (NG89) recommend administering the first dose of dalteparin within 14 hours of admission. **76.3%** of patients received the first dose of appropriate dalteparin within 14 hours when indicated.
6. The 6 reasons why patients did not receive appropriate thromboprophylaxis were: dalteparin indicated but not prescribed (4), incorrect dose of dalteparin for weight (2).

7. A repeat audit will be complete in June following Trust-wide switch from dalteparin (Fragmin) to enoxaparin (Inhixa).

Data at Trust Level

Overall, for OUH:

376 patients were audited

370 **(98.4%)** patients were receiving appropriate thromboprophylaxis (TP)

Within Medicine:

203 Medical patients audited

210 **(98.6%)** were reported as receiving appropriate TP

For the 3 patients not receiving appropriate TP, the reasons were recorded as:

- Dalteparin indicated but not prescribed (2)
- Incorrect dose of dalteparin for weight (1)

Within Surgery:

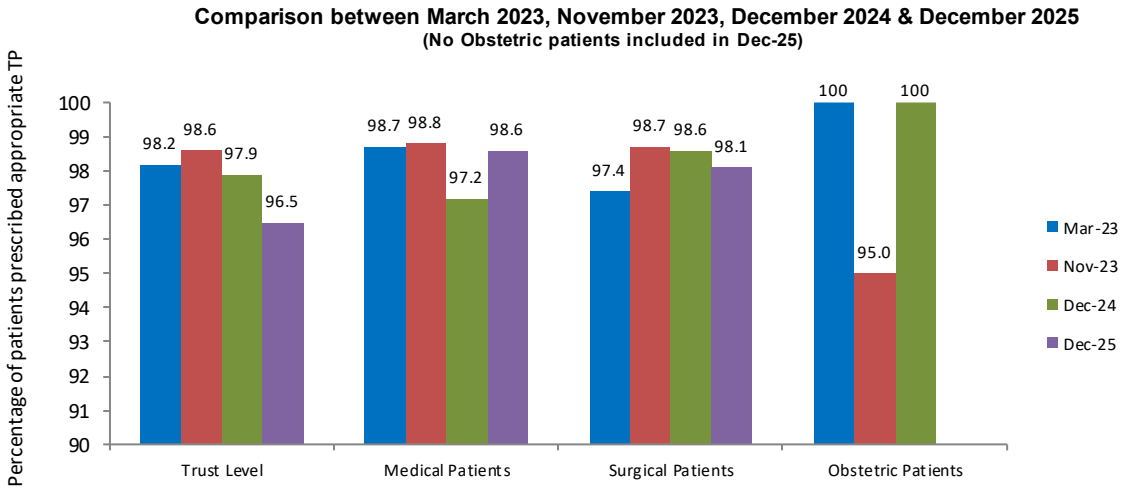
172 Surgical patients audited

159 **(98.1%)** were reported as receiving appropriate TP

For the 3 patients not receiving appropriate TP, the reasons were recorded as:

- Dalteparin indicated but not prescribed (2)
- Incorrect dose of dalteparin for weight (1)

Within Obstetrics: Not Included in this audit



Data at Divisional level:

NOTSSCaN Division

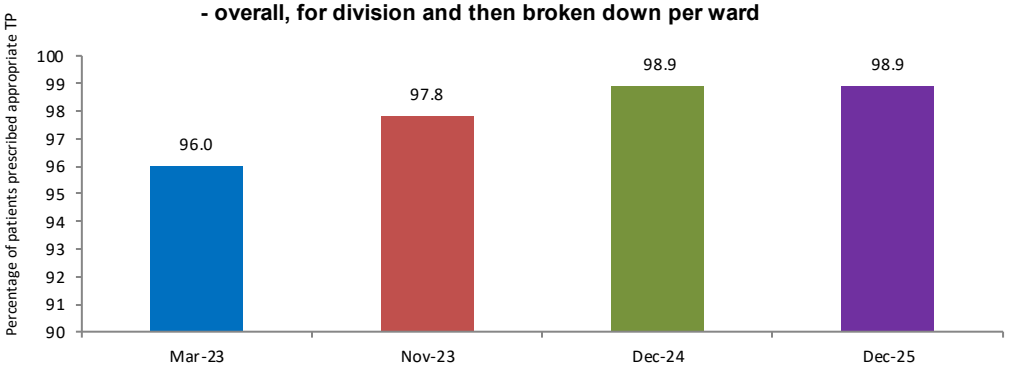
Total number of patients audited = 92 (80 Surgical, 12 Medical)

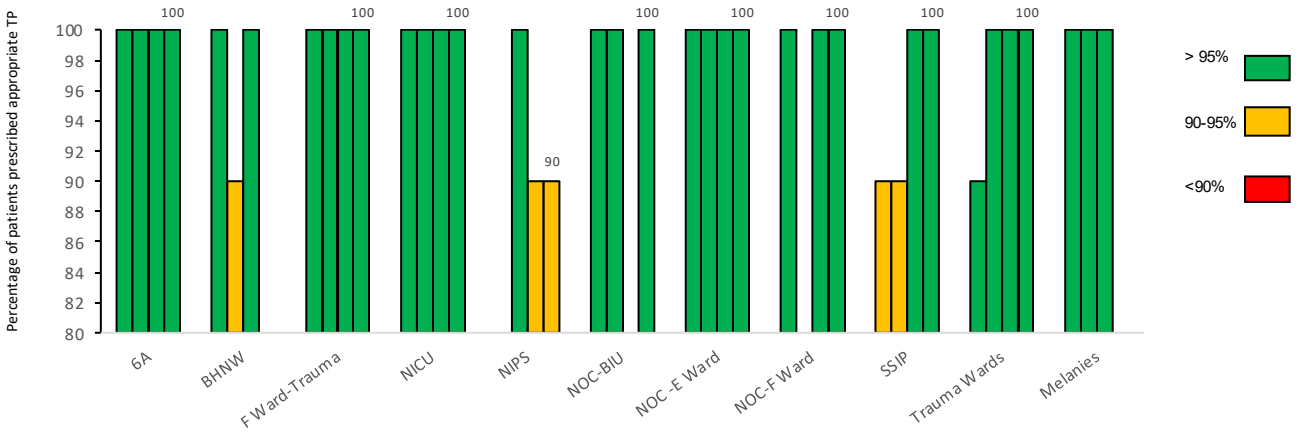
Patients receiving appropriate TP = 91 **(98.9%)**

For the 1 patient not receiving appropriate TP, the reason was recorded as:

- Dalteparin indicated but not prescribed (1)

Graphs to show comparison between March 2023, November 2023, December 2024 & December 2025 of percentage of patients receiving 'appropriate TP'.
- overall, for division and then broken down per ward





(1st Column-Mar-23/2ndColumn-Nov-23/3rdColumn-Dec- 24/4thColumn-Dec-25/5th)

(NOC-BIU-Not included in Dec 24, Melanies/ BHNW not included in Dec 25)

AES and IPC are medical devices and should be prescribed. However, for the purposes of auditing appropriate TP, patients were reported as having 'appropriate TP' if the patient was wearing AES/IPC even if they were not prescribed on the drug chart. Of the 65 (64 surgical/1 medical) patients audited for whom mechanical thromboprophylaxis was considered appropriate:

- 63 (96.9%) were prescribed AND administered mechanical TP
- 1 (1.5%) not prescribed but applied
- 1 (1.5%) not prescribed or applied

MRC Division

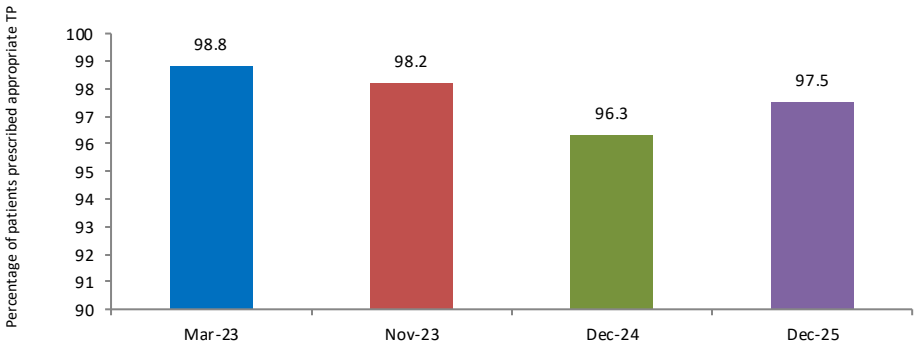
Total number of patients audited = 160 (131 Medical, 29 Surgical)

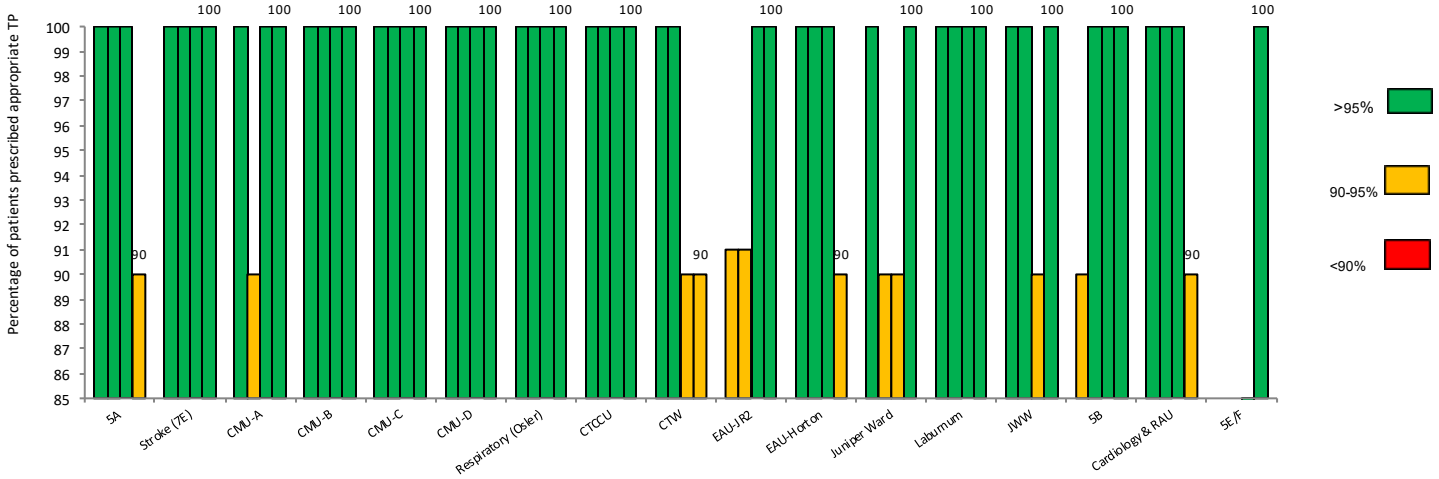
Patients receiving appropriate TP = 156 **(97.5%)**

For the 4 patients not receiving appropriate TP, the reasons were recorded as:

- Dalteparin indicated but not prescribed (2)
- Incorrect dose of dalteparin for weight (2)

Graphs to show comparison between March 2023, November 2023, December 2024 & December 2025 of percentage of patients receiving 'appropriate TP'.
- overall, for division and then broken down per ward





(1st Column-March 23 / 2nd Column-November 23 /3rd Column-December 24/4th Column- December 25)

AES and IPC are medical devices and should be prescribed. However, for the purposes of auditing appropriate TP, patients were reported as having 'appropriate TP' if the patient was wearing AES/IPC even if they were not prescribed on the drug chart. Of the 13 patients (8 surgical, 5 medical) audited for whom mechanical TP was considered appropriate:

- 13 (100%) were prescribed AND administered mechanical TP

SUWON Division

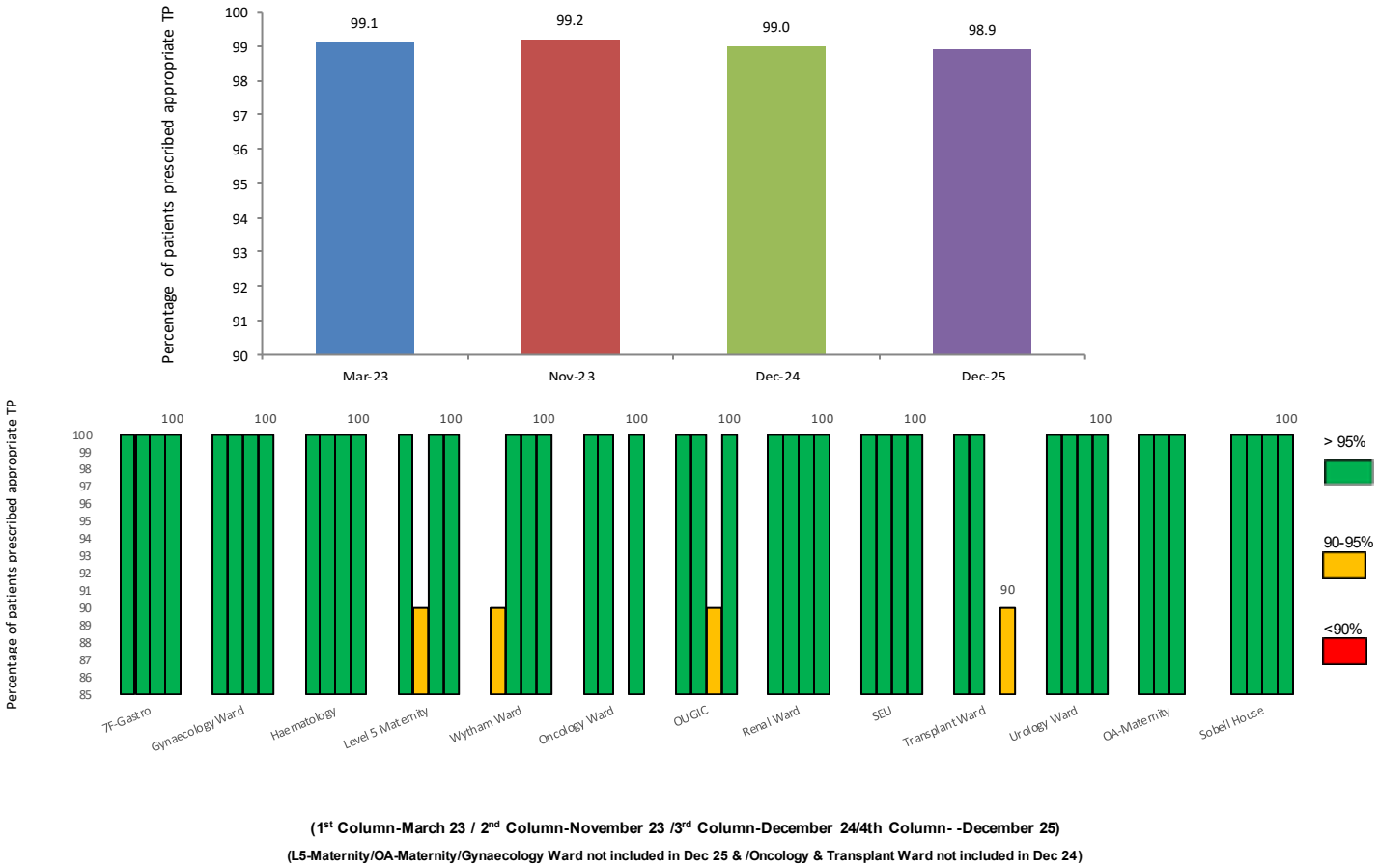
Total number of patients audited = 94 (44 Medical, 50 Surgical)

Patients receiving appropriate TP = 93 **(98.9%)**

For the 1 patient not receiving appropriate TP, the reason was recorded as:

- Dalteparin indicated but not prescribed (1)

Graphs to show comparison between, March 2023, November 2023, December 2024 & December 2025 of percentage of patients receiving 'appropriate TP'.
- overall, for division and then broken down per ward



(1st Column-March 23 / 2nd Column-November 23 /3rd Column-December 24/4th Column- -December 25)

(L5-Maternity/OA-Maternity/Gynaecology Ward not included in Dec 25 & /Oncology & Transplant Ward not included in Dec 24)

AES and IPC are medical devices and should be prescribed. However, for the purposes of auditing appropriate TP, patients were reported as having 'appropriate TP' if the patient was wearing AES/IPC even if they were not prescribed on the drug chart. Of the patients 45 (42 surgical, 3 medical) patients audited for whom mechanical TP was considered appropriate:

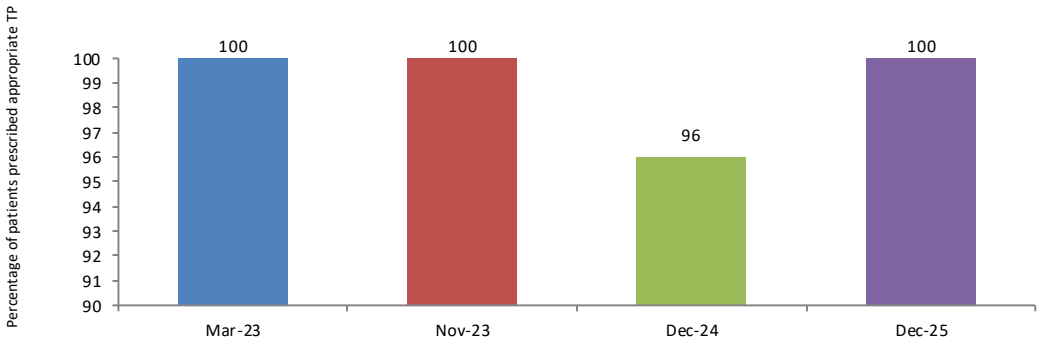
- 45 (100%) were prescribed AND administered mechanical TP

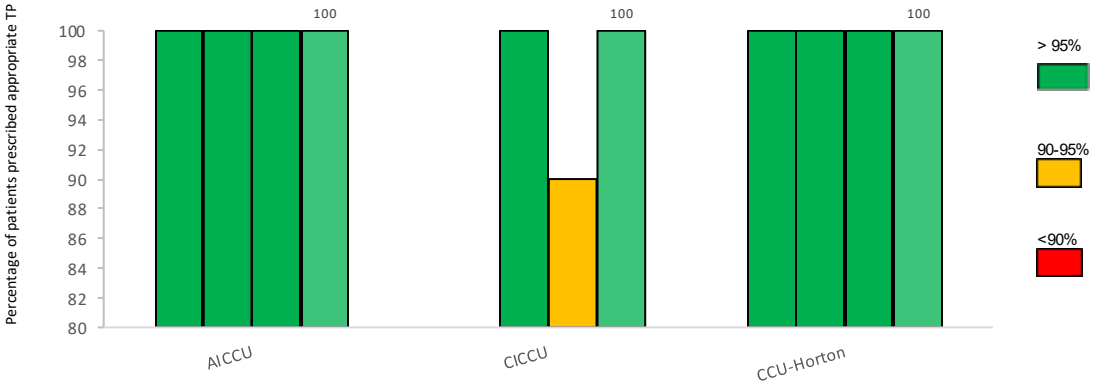
CSS Division

Total number of patients audited = 30 (16 Medical, 13 Surgical, 1 Obstetric)

Patients receiving appropriate TP = 30 (**100%)**

Graphs to show comparison between March 23, November 2023, December 2024 & December 2025 of percentage of patients receiving 'appropriate TP'.
- Overall, for division and then broken down per ward





(1st Column-March-23/2nd Column-November 23/3rd Column-December-24 /4th Column December-25)

(CICCU not included in March-23)

AES and IPC are medical devices and should be prescribed. However, for the purposes of auditing appropriate TP, patients were reported as having 'appropriate TP' if the patient was wearing AES/IPC even if they were not prescribed on the drug chart. Of the 14 (13 surgical, 1 Obstetric) patients audited for whom mechanical thromboprophylaxis was considered appropriate.

- 14 (100%) were prescribed AND administered mechanical TP