
VTE AWARD

Work in VTE Prevention

BIRMINGHAM WOMEN'S HOSPITAL

Improving Thromboprophylaxis in the postnatal period by adequately measuring patient's weight

In response to findings highlighted in the MBRRACE-UK Report (2023) 'Saving Lives, Improving Mother's Care' and the audit outcomes, a team within Anaesthetics at Birmingham Women's Hospital worked to implement a protocol to systematically measure the weight of patients pre-elective caesarean birth and post birth.

The Royal College of Obstetricians and Gynaecologists (RCOG) Guidance (2015b) states that a VTE risk assessment should be conducted for all women at least once following delivery and before hospital discharge. Additionally, MBRRACE-UK recommend that women be re-weighed at 28 weeks and in the postpartum period to ensure accurate VTE scoring and appropriate low weight heparin (LMWH) dosing.

In Birmingham Women's Hospital, Anaesthetists are responsible for conducting a VTE assessment in the immediate post-operative period for patients undergoing caesarean birth and also for prescribing the first dose of LMWH.

An audit was undertaken to evaluate the accuracy of weight documentation and its impact on BMI (body mass index). Data analysis revealed that 40% of patients were underdosed for their current weight, while 30% received a shorter treatment duration.

These results highlight the critical importance of accuracy in weight measurement in the postnatal period, to ensure appropriate thromboprophylaxis dosing as failure to do so may result in high-risk patients not receiving optimal prophylactic treatment, remaining at increased VTE risk and other thromboembolic complications.

The project is now extending to focusing on patients that have been prescribed LMWH in the postnatal period, with a multidisciplinary team involved in reviewing the Trust's policy regarding weight monitoring and thromboprophylaxis. The aim of this work will be to align local practice to the MBRRACE/RCOG guidance.

The programme has received positive engagement and feedback from patients and is expected to significantly positively impact patient safety outcomes.

