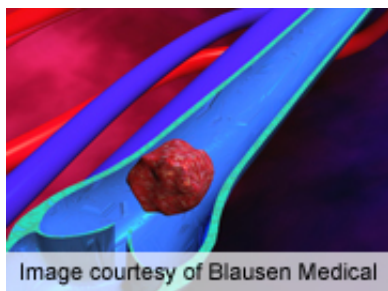


Evidence-based practices to prevent peri-op VTE identified

30 October 2012



Evidence-based practices to improve the consistency of venous thromboembolism prophylaxis in the perioperative period have been identified, according to research published online in the November issue of the *AORN Journal*.

(HealthDay)—Evidence-based practices to improve the consistency of venous thromboembolism (VTE) prophylaxis in the perioperative period have been identified, according to research published online in the November issue of the *AORN Journal*.

Brenda G. Larkin, R.N., from Aurora Lakeland Medical Center in Elkhorn, Wis., and colleagues examined the variations in the use of mechanical VTE [prophylaxis](#) and sought to use evidence-based practices to improve the consistency of prophylaxis care. To determine the best practices for implementation of mechanical VTE prevention in the perioperative period, a systematic literature review was conducted.

The researchers identified key practices, including the use of unilateral mechanical prophylaxis for some [orthopedic procedures](#) and optimal application times for initiating preoperative mechanical prophylaxis. There was no consensus regarding a cumulative benefit from combining sequential compression devices and graduated compression stockings. The use of alternative configurations for specialty procedural tables to prevent VTE was not supported by clinical

evidence. The best practices identified were disseminated within the hospital and to the greater nursing community.

"It is crucial for health care providers to better understand evidence-based best practices and build on the foundations of the Surgical Care Improvement Project measures," the authors write. "These efforts must be multidisciplinary and include nurses, physicians, pharmacists, and quality management staff members to be successful."

More information: [Abstract](#)
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