

**VTE risk assessment should be conducted in the following instances:**

- Preconception period or in the first trimester
- At every in-patient admission into hospital
- When there is a new intercurrent medical issue
  - In the immediate post-partum period

Risk factors	Score	Tick
<b>Pre-existing risk factors</b>		
Previous VTE (except for single event VTE provoked by major surgery)	4	
Previous VTE provoked by major surgery	3	
Known high-risk thrombophilia (Asymptomatic high-risk thrombophilia: homozygous factor V Leiden/compound heterozygote Protein C or S deficiency)	3	
Concurrent medical comorbidities (i.e. : malignancy, cardiac failure, active systemic lupus erythematosus, active inflammatory poly arthropathy, active inflammatory bowel disease, nephrotic syndrome, type 1 diabetes mellitus with nephropathy, sickle cell disease, current intravenous drug user)	3	
Family history of unproved or oestrogen related VTE in first degree relative	1	
Known low-risk thrombophilia (Asymptomatic low-risk thrombophilia: prothrombin gene mutation or heterozygous factor V Leiden)	1	
Age (>35 years)	1	
Obesity with BMI $\geq$ 30-39	1	
Obesity with BMI $\geq$ 40	2	
Parity $\geq$ 3	1	
Current smoker	1	
Gross varicose veins	1	
<b>Obstetric risk factors</b>		
Preeclampsia in current pregnancy	1	
Use of assisted reproductive technology (ART) or in vitro fertilisation (IVF) in current pregnancy	1	
Multi-gestational pregnancy	1	
Emergency caesarean section	2	
Elective caesarean section	1	
Mid-cavity or rotational operative delivery	1	
Prolonged labour (>24 hours)	1	
Post-partum haemorrhage (>1 litre)	1	
Preterm birth in current pregnancy (<37 weeks)	1	
Stillbirth in current pregnancy	1	
<b>Transient risk factors</b>		
Any surgical procedure in the pregnancy or puerperium (i.e. appendicectomy, post-partum sterilisation)	3	
Hyperemesis	3	
Ovarian hyperstimulation syndrome in the first trimester	4	
Current systemic infection	1	
Immobility or dehydration	1	
<b>Total score</b>		

- If total score is  $\geq$ 4 antenatally, consider thromboprophylaxis from the first trimester
- If total score is 3 antenatally, consider thromboprophylaxis from 28 weeks of gestation or at the time when risk factors changes (i.e. intercurrent illness)
- If total score is  $\geq$  2 postnatally, consider thromboprophylaxis for at least 10 days
- All women who require thromboprophylaxis antenatally, has a history of previous VTE, has a high-risk thrombophilia or has a low-risk thrombophilia + family history of VTE will require post-partum thromboprophylaxis for 6 weeks
- All women who are admitted into hospital antenatally, especially with prolonged admission ( $\geq$  3 days) should be considered for thromboprophylaxis