VTE Prophylaxis in patients with Suspected/Confirmed Covid-19 in LYPFT Inpatient Settings

A coagulopathy similar to, but distinct from, disseminated intravascular coagulation is a common feature in patients with SARS-CoV-2 infection (COVID-19 disease), especially those with severe illness. Furthermore, widespread microvascular thrombosis has been described in the lungs at post mortem in COVID-19 pneumonia. The coagulopathy is likely induced by a “cytokine storm” due to a severe host inflammatory response and hypoxia may also play a role in the pathophysiology.

* All patients with suspected or confirmed Covid require re-assessment for VTE prophylaxis.
* The threshold for commencing prophylaxis is lower given the coagulopathy associated with Covid-19 as well as the requirement for 14 days of isolation in patients with Covid-19, likely to cause reduction in mobility.
* Follow the LYPFT guidelines on VTE prophylaxis found on staffnet or via link

<http://staffnet2/sites/DocumentCentre/Resources/RISK%20ASSESSMENT%20FOR%20VENOUS%20THROMBOEMBOLISM%202020.docx>