



Complete "My risk factors" (below) and return to Royston at the same time as you return Forms 1, 2 and 3.

Name: _____

◀◀ Pre-admission risk assessment

▶▶ Post-operative recovery plan

Blood clots and **YOU**

YOU are more at risk of developing a **BLOOD CLOT** after surgery or a procedure than when you take a long-distance flight

What can **YOU** do to reduce your **RISK**?

WATER



ACTIVITY



COMPRESSION



◀◀ Pre-admission risk assessment

My risk factors

Blood clots can develop in the legs and pelvis and can be dangerous if they travel through the body and block blood supply to the lungs.

Admission to hospital to undertake treatment puts you at **HIGH** risk of **BLOOD CLOTS**.

If any of the following apply, **YOU** are at **HIGHER RISK** of a blood clot.

- I am having a surgical operation or procedure
- I have had a blood clot in the past
- Someone in my family has had a blood clot
- I am a smoker
- I have cancer and/or am undertaking cancer treatment or therapy
- I have a chronic illness/blood disease
- I have varicose veins
- I am over 40 years old
- I am overweight
- I am pregnant or have recently given birth
- I am on the contraceptive pill
- I am undertaking hormone replacement therapy
- I am on steroids
- I have not been physically active (e.g. walking) recently
- I have recently taken a long-distance flight

What actions can **I** take to reduce my risk of **BLOOD CLOTS**?



Drink the recommended amount of water

Water may ensure the blood stays fluid for good blood flow. Reduced water intake could thicken the blood.



Keep active

Frequent light activity (e.g. getting up, walking around and leg exercises) helps to bring blood back from the lower legs, reducing the risk of blood sitting and clotting in the veins.



Wear compression stockings

Compression stockings reduce the diameter of the veins in the legs, improving blood flow.

Patient Name: Surname Given names

Date of Birth:

My recovery plan

My discharge date: _____

How much water should I drink everyday for the next 8 weeks? _____

My activity prescription

Week 1 _____	Week 5 _____
Week 2 _____	Week 6 _____
Week 3 _____	Week 7 _____
Week 4 _____	Week 8 _____

How long should I wear my compression stockings? _____

Medication plan: _____

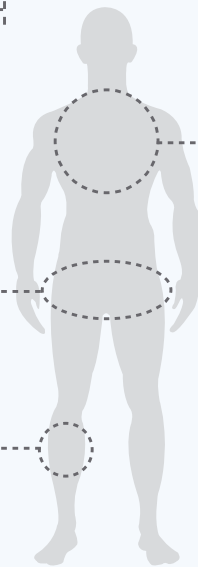
Signs I should watch for

Have a raised temperature -----

Feeling unwell

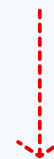
Feel pain in your pelvis -----

Experience pain and/or swelling in your legs -----



Have sudden shortness of breath and/or feel pain in your chest

Are coughing up blood-streaked mucus



Contact your doctor immediately if you are concerned about your health or well-being or are experiencing any of the above symptoms.

Non-emergency phone contact: _____

If you are experiencing any of the above symptoms, **it is an emergency**. Call the ambulance on **111** and inform them that you have had surgery and are showing signs of a blood clot.

Your checklist to:

- Complete the pre-admission risk assessment
- Ask your doctor if treatment is required
- Bring this brochure into hospital
- Before you go home, ensure you understand what to do, talk with your nurses and doctors and write up your recovery plan.

If applicable:

I understand my blood thinning medicines plan:

- Before coming to hospital
- When I go home.

Apply adhesive name label here

Would you like to know more?

www.royston.co.nz/patients-and-visitors/admission-information/blood-clots-information

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