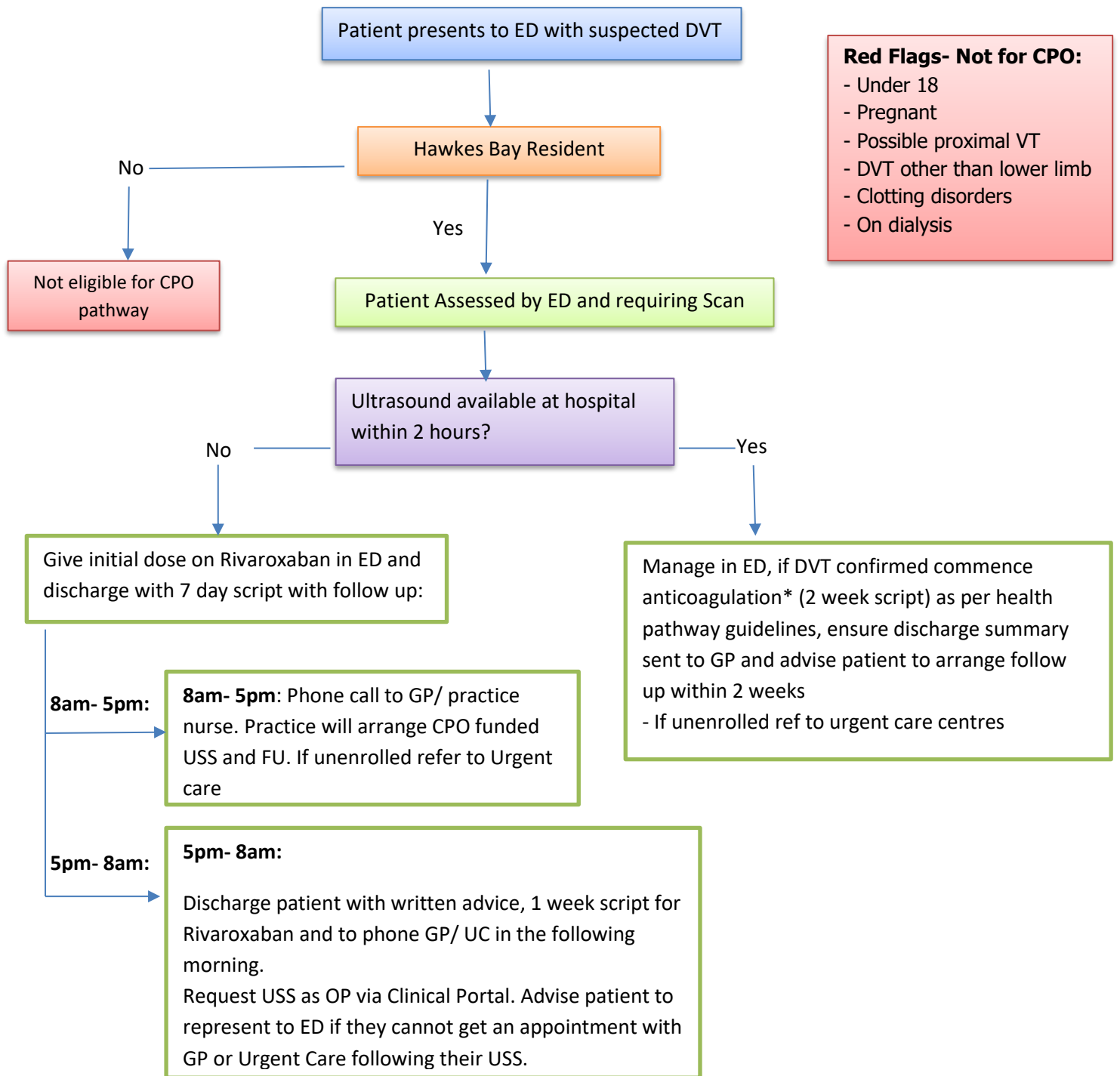


CPO ED Back-Referral for Suspected DVT



Ultrasound Scans

Ultrasound Scans can be arranged through

- TRG Imaging ph: 06 873 1166 (Hastings) or 06 835 3306 (Greenmedows) or 06 8670736 (Gisborne)
- Onsite Ultrasound ph: 0800 991 119 (Napier)
- Onsite Ultrasound ph: 06 835 1900 (Havelock North)
- Unity Specialist & Ultrasound ph: 06 2812797 (Hastings)
- Coastal Radiology ph: 06 867 3132 (Gisborne)

CPO ED Back-Referral for Suspected DVT

Purpose

To support investigation and management of Deep Vein Thrombosis (DVT) within primary care, following assessment at the Te Whatu Ora – Health New Zealand Te Matau a Māui, Hawke's Bay (Te Whatu Ora – Hawke's Bay) Emergency Department (ED).

Patients who present to ED and can be safely managed within general practice for a suspected DVT, can be referred to their GP, NP or an Urgent Care for investigation and management.

Criteria

- Hawke's Bay Resident
- Patient presents with suspected DVT and no other pathology requiring admission or inpatient work up.

Entry into Pathway

- Suitable for patients with suspected DVT that can be managed in Primary Care for Suspected DVT
- Initiated by ED staff at Te Whatu Ora – Hawke's Bay referring the patient back to a General Practitioner (GP), Nurse Practitioner (NP) or Urgent Care

Exclusion criteria:

1. Under 18
2. Pregnant
3. On Dialysis
4. Clotting disorder
5. Concern for significant proximal VTE or concurrent PE

Funding

The general practice will be required to complete the Halcyon referral form for this pathway as ED has no access to the Halcyon form.

Referral and Claiming/Outcome is through the **Halcyon Provider Portal > CPO Programmes > Acute Care > DVT ED Referral**. Funding is fee for service.

Pathway

Ultrasound scan available in ED

- Patient presenting to ED will be assessed and if DVT confirmed, will be managed by ED with follow up in general practice/urgent care within 2 weeks

Ultrasound scan **not** available in ED

- The appropriateness of the patient being managed by general practice decided and the initial dose Rivaroxaban will be administered
- **From 8am-5pm**-Patient will be referred back to general practice or nominated Urgent Care for management under CPO Suspected DVT Pathway
- ED will contact patients GP surgery (if enrolled in a practice) advising the patient requires follow-up and management for Suspected DVT
- **From 8pm-8am** - Patient is discharged with written advice and advised to attend their GP surgery or Urgent Care the following day

CPO Suspected Deep Vein Thrombosis (DVT) Pathway

Refer to the CPO Suspected DVT Pathway for further information.

<https://healthhb.co.nz/cpo-clinical-pathways/>

Discharge Summary:

- Patient will be discharged with their Discharge Summary and advice sheet as attached, GP or relevant Urgent Care centre will be cc'd into this.
- Plan of care, dose and time of administration of Rivaroxaban (if applicable) will be included.

No Charge to Patient

As the patient has had their first consultation at ED all subsequent care for the patient while they are receiving treatment is provided free of charge to the patient CPO funding the services provided in general practice according to the current pathway.