

eAppendix 2. Venous Thromboembolism Cohort Standardized Note Template

Patient identified as having documentation of VTE diagnosis and receiving anticoagulation therapy. Chart reviewed to evaluate ongoing indication for anticoagulation therapy.

Current anticoagulation therapy: _____

Most recent indication for anticoagulant use:

VTE

Acute/provoked: _____

Transient risk factors identified at time of diagnosis:

Hospitalization: _____

Trauma: _____

Surgery: _____

Plaster cast immobilization: _____

Hormone therapy: _____

Pregnancy: _____

Prolonged travel: _____

Other: _____

Patient with history of acute/provoked VTE and current anticoagulation use. Based on the above transient risk factor(s), patient indicated for anticoagulant use for 3 to 6 months.

Based on review, patient has received < 3 months of anticoagulation, recommend assessment of anticoagulation therapy at 3 and 6 months

Based on review, patient has received > 3 months of anticoagulation, recommend assess need to continue anticoagulation therapy

Acquired or persistent risk factors identified at time of diagnosis:

Malignancy

Medications

Thrombophilia

Other: _____

Patient with history of acute/provoked VTE and current anticoagulation use. Based on the above acquired or persistent risk factor(s), recommend continuing to monitor for risks versus benefits of anticoagulation therapy.

Could consider reduced-intensity dosing

Acute/unprovoked: patient with history of acute/unprovoked VTE and current anticoagulation use.

Based on review, patient has received < 3 months of anticoagulation, could consider assessment of need to continue anticoagulation therapy at 3 and 6 months based on location.

Based on review, patient has received > 3 months of anticoagulation, could consider assessment of need to continue anticoagulation therapy based on location.

Could consider reduced-intensity dosing

Recommend continuing to monitor for risks versus benefits of anticoagulation therapy

Chronic/recurrent: patient with history of chronic/recurrent VTE and current anticoagulation use. Recommend continuing to monitor for risks versus benefits of anticoagulation therapy.

Could consider reduced-intensity dosing

Other: _____

Based on indication, appropriate to continue anticoagulation therapy at this time. Recommend continuing to monitor for risks versus benefits of anticoagulation therapy.

Flagging anticoagulation CPP for further review.