- **Post-thrombotic syndrome:** This happens if a DVT damages the valves in the deep veins, so that instead of flowing upwards, the blood pools in the lower leg. This can lead to long term main, swelling, and in severe cases, ulcers on the leg.
- **Limb ischaemia:** A rare complication that only happens in severe DVT, because of the blood clot in the leg vein, the pressure in the vein can become very high. This can obstruct the blood flow through the arteries, so less oxygen is carried to the affect area.

If you are having surgery

Surgery and some medical treatment can increase the risk of having a DVT. If you are going to hospital for an operation, you have a pre-operative risk assessment for DVT. This takes into account your personal risk factors and the type of surgery you are having. Various measures can then be used to keep your risk as low as possible (including anticoagulant medicines and compression stockings).

Travel risks?

There is evidence that long-haul flights (four hours or more) may increase the risk of developing DVT. The risk is mainly the result of prolonged immobility, which can happen during any form of long distance travel, whether by car, bus, train or air.

If you are travelling

Although the added risk of developing DVT on a long journey seems to be low, there are some preventive measures you can take. Wherever possible, you should:

- Take short walks (this can be up and down the aisle of a coach, train or plane);
- Exercise the muscle of your lower legs, which act as a pump for the blood in the veins by regularly bending and straightening your toes, ankles and legs;
- Wear loose fitting clothing;
- Drink plenty of water;
- Avoid excessive alcohol or caffeinated drinks such as coffee;
- Not take sleeping tablets as these will make you less active; and Wear graduated compression stockings if you have other risk factors for DVT.

Will information regarding my scan be recorded and sent to my GP?

Information regarding patients is recoded on a clinical system and is confidential. We will inform your GP, in writing, of your results and send a written report unless you ask us not to.

You have the right to request access to your medical record. To apply for access, please write to BEMS+ at the address provided.

Non-English speakers

Copies of this guide are available in other languages. Please contact us stating which language you require the guide in.

Notice to patients

All care that we provide is confidential. Although you have the right to receive healthcare, we ask that you treat our team with respect to ensure you and all other patients are treated safely and quickly

Please ask at reception for a copy of our Patient Rights and Responsibilities leaflet.

How to make a complaint

If you wish to make a complaint about the service you have received, then please contact BEMS Complaints Manager, at the address provided, or phone 01225 560806.

Patient feedback

BEMS welcomes all feedback on this patient information guide and the service we provide. Please write to us at the address provided.

You will be given a patient survey after you have been seen by the clinician. It is useful to hear your views on the service and your comments help us to keep making it better.

Contact details

BEMS
Unit 1a, Paulton House
Old Mills
Paulton
BB39 7SX
Website: Bems.uk.com

NHS

BEMS Clinical Services

Community Deep Vein Thrombosis (DVT) Service

Patient information

Telephone: 01225 560806

Your Scan will be carried out at:

Combe Down Branch Surgery
Sulis Manor Road
Odd Down
Bath BA2 2AE

Just off the A367 by the Odd Down Park & Ride bus terminal

Who is the service provider?

The Deep Vein Thrombosis (DVT) service is provided by BEMS, a not-for-profit Community Benefits Society, whose members include local GPs and Practices as well as staff and patients. It is an NHS service that is free to all Bath and North East Somerset patients.

How do I get an appointment?

Your own GP will provide the initial service and refer you to a community scanning service if required. You will then return to your GP for onward treatment.

If you require an interpreter, then please indicate this at the time of your booking.

What is Deep Vein Thrombosis (DVT)?

A DVT happens when a blood clot forms in a deep vein. It most commonly occurs in the deep veins of the lower leg (calf), and can spread up to the deep veins such as an arm.

Deep veins pass through the centre of the leg and are surrounded by a layer of muscle. Blood clots that form in the superficial veins, which lie just under the skin, are known as superficial phlebitis. These are different to a DVT and are much less serious.

What are the symptoms of DVT?

Many blood clots that occur in a DVT are small and do not cause any symptoms. Your body will usually be able to break them down with no long term effects.

Larger clots may block the blood flow and cause:

- swelling of the affected leg;
- pain in the affected leg;
- reddening of the affected leg.

These conditions may not be a result of DVT but it is always best to consult your GP.

What causes a DVT?

You are more likely to get a DVT if you are over 40 years old, if you are immobile, travelling or have had an operation, you have a greater risk of DVT.

- Certain blood diseases;
- Cancer or cancer treatment;
- Circulation problems or heart failure; or
- Recent surgery or an injury, particularly to the knees and hips.

The risk of a DVT is also increased in women who:

- Take a contraceptive pill that contains oestrogen;
- Take Hormone Replacement Therapy (HRT);
- Are pregnant; or
- Have recently had a baby.

Diagnosis?

Your GP will ask you about your medical history and examine you. Your GP or practice nurse may perform a D-Dimer Near Patient Test. This is a 10 minute test where a few drops of your blood from a pin prick are placed on a test pad. If this is negative, it is unlikely that you have a DVT.

If it is positive, your GP will request an ultrasound. This is the best way to detect blood clots. The GP or practice nurse will phone BEMS and make a scan appointment either for that day or for the following day. If the scan appointment is not on the same day, your GP will commence suitable anticoagulation treatment.

If you need to bring children with you, please arrange for someone to supervise them during your consultation. We are unable to allow children (including babies) to accompany you into the clinical areas unless they are also a patient.

BEMS takes the dignity and privacy of patients very seriously and will at all times respect your confidentiality. All appointments are carried out in a private room away from the reception area.

Who will I be seen by and how do I know that they are qualified to treat me?

Each Vascular Scientist is registered with a professional body and has undertaken specific training to qualify them. Each member of staff has to provide evidence of their registration, training and criminal record status prior to being able to work with patients.

What types of treatment are available if my scan is positive?

If your scan is positive, you will need to have appropriate anticoagulation medicine every day until advised otherwise by your GP.

Compression Stockings

Your doctor may recommend that you use compression stockings to relieve pain and swelling, and to prevent post-thrombotic syndrome. You may need to wear them for two years or more after having a DVT. Stockings will be prescribed by your doctor if required.

Medicines

There are various anticoagulation treatments available, ranging from Direct Oral Anticoagulant Drugs (DOACS) to Low Molecular Weight Heparin (LMWH) and Warfarin. Your GP will decide which is the most appropriate for you. The following precautions need to be taken if you are on an anticoagulant:

- Do not take if you are pregnant;
- Always notify a doctor/clinician that you are taking this treatment; and
- Do not participate in activities that increase your risk of injury. This is because these medicines work by interfering with the blood clotting process, so you will be more likely to bleed and bruise.

These medicines work by dissolving blood clots and carry a risk of bleeding.

Prevention?

Ask your doctor for advice if you have risk factors for developing a DVT. There are methods in which the risk can be reduced such as exercising your legs regularly by taking a daily 30 minute walk. There is no evidence that taking aspirin reduces the risk of developing DVT.

What are some of the complications of DVT?

DVT may not cause any further problems. However, some complications include:

- **Pulmonary embolism:** This is the most serious complication of a DVT. A pulmonary embolism (PE) is when a piece of the blood clot from a DVT breaks off and travels through the bloodstream to the lungs. It can then block a pulmonary artery causing chest pain,