

PREVENTING VENOUS THROMBOEMBOLISM THROUGHOUT THE CONTINUUM OF CARE

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From the editor

Venous thromboembolism (VTE) is a disease that is under the microscope of several important organizations, including the Centers for Medicare and Medicaid Services (CMS) and the Joint Commission. It is also at the forefront of the agendas of hospital safety and quality-improvement committees. There is a push to look at both process and outcome measures with VTE, and these measures have been linked to hospital pay-for-performance programs.

This supplement is based on a recent roundtable conference in Miami, FL, that brought together six nationally renowned experts in thromboembolic disease to discuss evidence-based best practices surrounding VTE prevention. We focused on prevention in three high-risk populations: hospitalized medical patients, cancer surgery patients, and patients undergoing major joint replacement or hip fracture repair. We also discussed clinical cases and challenges as part of the roundtable discussion portions that conclude each of the three major articles in this supplement.

Our goal in developing this supplement has been to make clear the need for clinicians to focus on details of the type, dose, and duration of appropriate VTE prophylaxis both in the hospital and at discharge, with the ultimate goal of preventing a large number of patients from presenting in the outpatient setting as a result of failure to prevent VTE.

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