Call to Action to Prevent Venous Thromboembolism in Hospitalized Patients

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Venous thromboembolism (VTE) is a major preventable disease that affects patients who are extremely important to su
exist that prevent their full adoption, compliance, and efficacy. This has led to persistence of
several decades. This policy statement provides a focused review of VTE, risk scoring
measures for the hospital environment, and tracking methods. From this summary, five m
guidance are presented that the AHA believes will lead to better implementation, track
events. They include:

- Performing VTE risk assessment and reporting the level of VTE risk in all hospi
- Integrating 'preventable VTE' as a benchmark for hospital comparison and pay
- Supporting appropriations to improve public awareness of VTE
- National tracking of VTE using standardized definitions
- Developing and publicizing a VTE [illegible]
- Given that much of the morbidity and mortality from VTE is preventable, increased VT
prioritization of proven, evidence-based primary prevention strategies accompanie
of hospital-acquired VTE should be a national health priority.
- Treatment for acute VTE is estimated to incur direct medical costs of $10,000 to $15,000
per individual in first-year survivors, and between 10 to 30% of acute VTE survivors
within 5 years. The projected annu n