## THROMBOSIS REFERRAL GUIDELINE

### HIGH RISK

**SUGGESTED EMERGENT CONSULTATION**

- Concern for ischemic stroke, pulmonary embolism, or significant DVT

**SYMPTOMS AND LABS**

- New neurologic deficit with CNS imaging showing ischemic stroke
- Chest pain, dyspnea, hypoxia with imaging showing pulmonary embolism
- Extensive DVT

**SUGGESTED PREVIST WORKUP**

- Urgent contact to MCCP to discuss emergent management including further diagnostics and treatment
- Initiate urgent anti-coagulation
- Arrange for urgent transfer and admission to MMC

### MODERATE RISK

**SUGGESTED CONSULTATION OR CO-MANAGEMENT**

- Concern for uncomplicated DVT or superficial thrombosis

**SYMPTOMS AND LABS**

- Suspected DVT on exam
- Uncomplicated DVT documented on imaging
- Superficial thrombosis, suspected or documented by imaging

**SUGGESTED WORKUP**

- Consider hospital admission to initiate anti-coagulation as indicated
- Contact MCCP to discuss initial management including further diagnostics and treatment

### LOW RISK

**SUGGESTED ROUTINE CARE**

- Family history of thrombosis or thrombophilia

**SYMPTOMS AND LABS**

- Healthy child with normal exam
- Family history of thromboembolism and/or documented genetic thrombotic disorder (i.e. Factor V Leiden, MTHFR, Prothrombin mutation)

**SUGGESTED MANAGEMENT**

- Males: Comprehensive pediatric health care and anticipatory guidance with no further testing indicated
- Females: Comprehensive pediatric health care and anticipatory guidance. Consider screening if considering oral contraceptive agents
- Contact MCCP if consultation is desired for family education

### CLINICAL PEARLS

- Life threatening and significant thrombotic events require immediate anticoagulation and consideration of thrombolysis.
- Most thrombotic events in children involve more than one risk factor (genetic and/or anatomic).
- Prophylactic anticoagulation is generally not indicated in children with genetic risk factors who have not had a thrombotic event.
- Genetic screening may be useful in females considering oral contraception in guiding the selection of the agent.