



# Optimal Contemporary Management of Deep Venous Thrombosis: Efficacy and Safety in the Age of the NOACs

## General Project Description:

The Hospital Quality Foundation (HQF) is contacting you to make you aware of an accredited Continuing Medical Education program that is available to your Institution. Delivered as a 1-hour Grand Rounds, our expert faculty will discuss the most current information and guidance on the evidence basis for using alternatives to warfarin in VTE management in the outpatient and inpatient settings.

## Goal:

This program is to inform and educate an audience comprised primarily of emergency and hospital medicine providers with Venous thromboembolism (VTE)—comprised of acute deep venous thrombosis (DVT) and acute pulmonary embolism (PE)—is a common diagnosis most often encountered in the hospital setting. The annual incidence in the general population is 1-2 per 1000, and is much higher in some well-characterized subgroups. Outpatient VTE typically prompts presentation to an emergency department (ED) for confirmation of diagnosis, for acute treatment, or both. In contemporary practice, it is increasingly common to manage patients with uncomplicated DVT as outpatients from the ED, either with enoxaparin bridging to warfarin or with rivaroxaban as oral monotherapy. This logistically and economically favorable therapeutic option, however, remains markedly underutilized. Patients with more complicated DVT, those with logistical or social contraindications to outpatient treatment, and patients with PE are admitted for inpatient care, most often to the hospital medicine service. VTE that presents in the inpatient setting, both in medical and in surgical patients, is also most often managed by a hospitalist, who will also establish continuing VTE therapy post-discharge.

Therefore, the majority of VTE in contemporary US practice is managed primarily by emergency physicians and hospitalists. These hospital-based practitioners should be familiar with and guided by the most current data on VTE management. Education of these two groups, along with allied health professionals that work closely with them, will result in improved use of evidence-based therapy, improvements in cost of care and patient satisfaction, greater comfort with primarily (or exclusively) outpatient treatment of DVT and perhaps stable PE, and an overall improvement in patient outcomes.

## ABOUT THE HQF:

We are a 501c3 not-for-profit organization whose mission is to improve the quality of health care by supporting the development and/or delivery of information and education related to hospital medicine. The HQF and its partner organizations, CE Symmetry and CMEsolutions, disseminate healthcare information, provides a focal point for a cross section of

## Learning Objectives:

- Cite evidence that supports alternative therapies to bridge-to-warfarin therapy for DVT
- Differentiate among the currently available novel oral anticoagulant (NOAC) agents in terms of mechanism of action, current indications, and both efficacy and safety data
- Design and implement treatment pathways for direct ED-to-outpatient, ED-to-observation-to-outpatient, and inpatient-to-outpatient management of uncomplicated DVT
- Review the existing guidance on management of NOAC-related bleeding complications

## Target Audience:

- Emergency Medicine Attending Physicians, Emergency Medicine Physicians-in-Training, Hospitalists and other hospital-based practitioners and allied health professionals at Academic Medical Centers. This includes;
  - Emergency Physicians and ED Nurses
  - ED-based PAs, NPs, and clinical pharmacy specialists from the ED
- Emergency Medicine Staff, Hospitalists and other hospital-based practitioners and allied health professionals at non Academic Medical Centers that have high Emergency Medicine patient volumes.

## Fee:

There is no cost to the host organization. The faculty honorarium, travel and expenses are all provided by the Hospital Quality Foundation.

## Please respond to:

Robert Batte or Graham Batte at CE Symmetry to discuss this CME opportunity in further detail. Robert and Graham may be reached at [info@cesym.com](mailto:info@cesym.com) or by calling 888-488-4452.

stakeholders and leaders, and establishes a repository of information for local, national, and international provider education. HQF is directed by a board of highly qualified individuals with experience and expertise in healthcare quality and hospital medicine. Emphasis is consistently placed on educating and engaging physicians and other acute care practitioners in advancing hospital quality improvement.