

Addressograph

## **OUTPATIENT THROMBOSIS UNIT REFERRAL CHECKLIST**

Is patient appropriate for outpatient investigation/management?
Refer to ED guidelines on infonet at:
<a href="http://infonet/documnets\_emergency/Pulmonary%20Embolism%20or20DVT">http://infonet/documnets\_emergency/Pulmonary%20Embolism%20or20DVT</a>

If Yes then →

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Fax a copy of the Thrombosis Unit Suspected/Confirmed DVT to TOH/General Campus Module H 613-737-8093.
Patient information package given in Emergency Department to patient with a copy of record of treatment (ROT), <a href="https://www.ultrasound/CT/VQ">ultrasound/CT/VQ</a> report (as applicable) if DVT or PE has already been confirmed. We will not be able to properly assess patient without at least a preliminary written diagnostic imaging report.
Patient name, phone number, hospital number, and <u>called</u> to <u>613-798-5555 ext. 78060 (Weekends/Stats)</u> .
Please call the thrombosis MD on call if you have any questions or concerns through locating at 613-798-5555 ext. 14221.
If D-timer negative and PE/DVT unlikely please call the Thrombosis physician directly <u>before</u> referring patient.