

VTE Prophylaxis Options for Surgery	
Surgery Type	Recommended Prophylaxis Options*
Intracranial Neurosurgery Appendix A, Table 5.17	Any of the following: <ul style="list-style-type: none"> • Intermittent pneumatic compression devices (IPC) with or without graduated compression stockings (GCS). • Low-dose unfractionated heparin (LDUH). • Low molecular weight heparin (LMWH).† • LDUH or LMWH† combined with IPC or GCS. † Current guidelines recommend <i>postoperative</i> low molecular weight heparin for Intracranial Neurosurgery.
General Surgery Appendix A, Table 5.19	Any of the following: <ul style="list-style-type: none"> • Low-dose unfractionated heparin (LDUH). • Low molecular weight heparin (LMWH). • Factor Xa Inhibitor (Fondaparinux) • LDUH or LMWH or Factor Xa Inhibitor (fondaparinux) combined with IPC or GCS.
General Surgery with contraindications to pharmacological prophylaxis Appendix A, Table 5.19	Any of the following: <ul style="list-style-type: none"> • Graduated Compression stockings (GCS). • Intermittent pneumatic compression devices (IPC).
Gynecologic Surgery Appendix A, Table 5.20	Any of the following: <ul style="list-style-type: none"> • Low-dose unfractionated heparin (LDUH). • Low molecular weight heparin (LMWH). • Factor Xa Inhibitor (fondaparinux). • Intermittent pneumatic compression devices (IPC). • LDUH or LMWH or Factor Xa Inhibitor (fondaparinux) combined with IPC or GCS.
Urologic Surgery Appendix A, Table 5.21	Any of the following: <ul style="list-style-type: none"> • Low-dose unfractionated heparin (LDUH). • Low molecular weight heparin (LMWH). • Factor Xa Inhibitor (fondaparinux). • Intermittent pneumatic compression devices (IPC). • Graduated compression stockings (GCS). • LDUH or LMWH or Factor Xa Inhibitor (fondaparinux) combined with IPC or GCS.
Elective Total Hip Replacement Appendix A, Table 5.22	Any of the following started within 24 hours of surgery: <ul style="list-style-type: none"> • Low molecular weight heparin (LMWH). • Factor Xa Inhibitor (Fondaparinux) • Warfarin.

* Patients who receive neuraxial anesthesia or have a documented contraindication to pharmacological prophylaxis may pass the performance measure if either appropriate pharmacological or mechanical prophylaxis is ordered.

VTE Prophylaxis Options for Surgery (Cont.)	
Surgery Type	Recommended Prophylaxis Options*
Elective Total Knee Replacement Appendix A, Table 5.23	Any of the following: <ul style="list-style-type: none"> • Low molecular weight heparin (LMWH). • Factor Xa Inhibitor (Fondaparinux). • Warfarin. • Intermittent pneumatic compression devices (IPC). • Venous foot pump (VFP)
Hip Fracture Surgery Appendix A, Table 5.24	Any of the following: <ul style="list-style-type: none"> • Low-dose unfractionated heparin (LDUH). • Low molecular weight heparin (LMWH). • Factor Xa Inhibitor (Fondaparinux) • Warfarin.
Elective Total Hip Replacement with contraindications to pharmacological prophylaxis Appendix A, Table 5.22	Any of the following: <ul style="list-style-type: none"> • Intermittent pneumatic compression devices (IPC). • Venous foot pump (VFP).
Hip Fracture Surgery with contraindications to pharmacological prophylaxis Appendix A, Table 5.24	Any of the following: <ul style="list-style-type: none"> • Graduated Compression Stockings (GCS). • Intermittent pneumatic compression devices (IPC). • Venous foot pump (VFP).

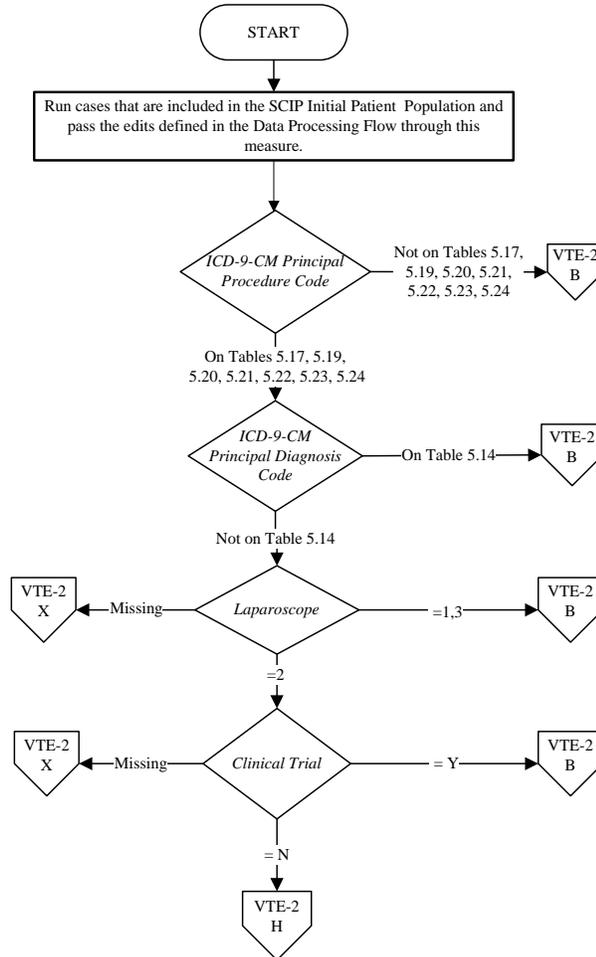
** Patients who receive neuraxial anesthesia or have a documented contraindication to pharmacological prophylaxis may pass the performance measure if either appropriate pharmacological or mechanical prophylaxis is ordered.*

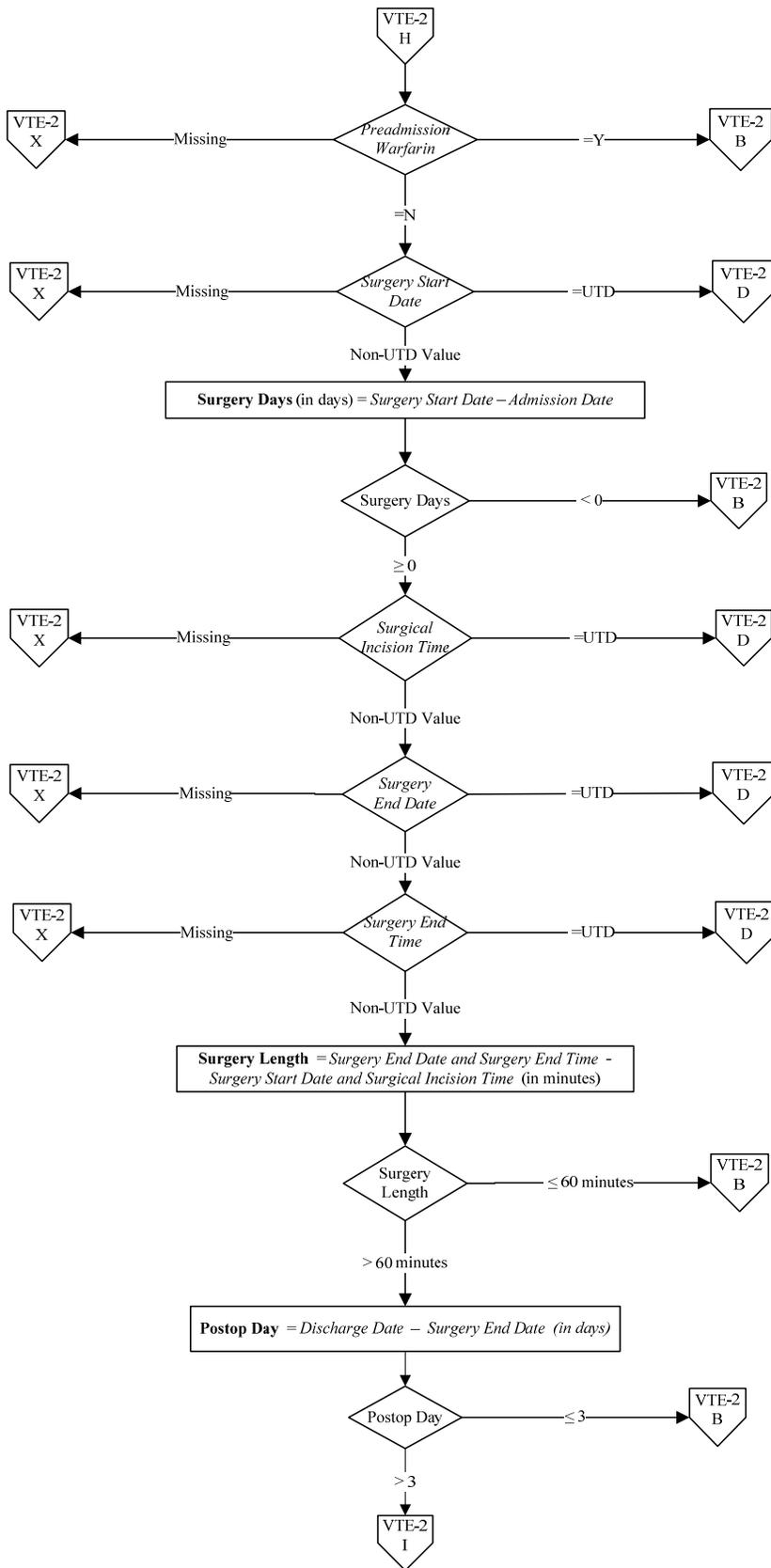
SCIP-VTE-2: Surgery Patients Who Received Appropriate Venous Thromboembolism Prophylaxis Within 24 Hours Prior to Surgery to 24 Hours After Surgery

Numerator: Surgery patients who received appropriate venous thromboembolism (VTE) prophylaxis 24 hours prior to *Surgical Incision Time* to 24 hours after *Surgery End Time*

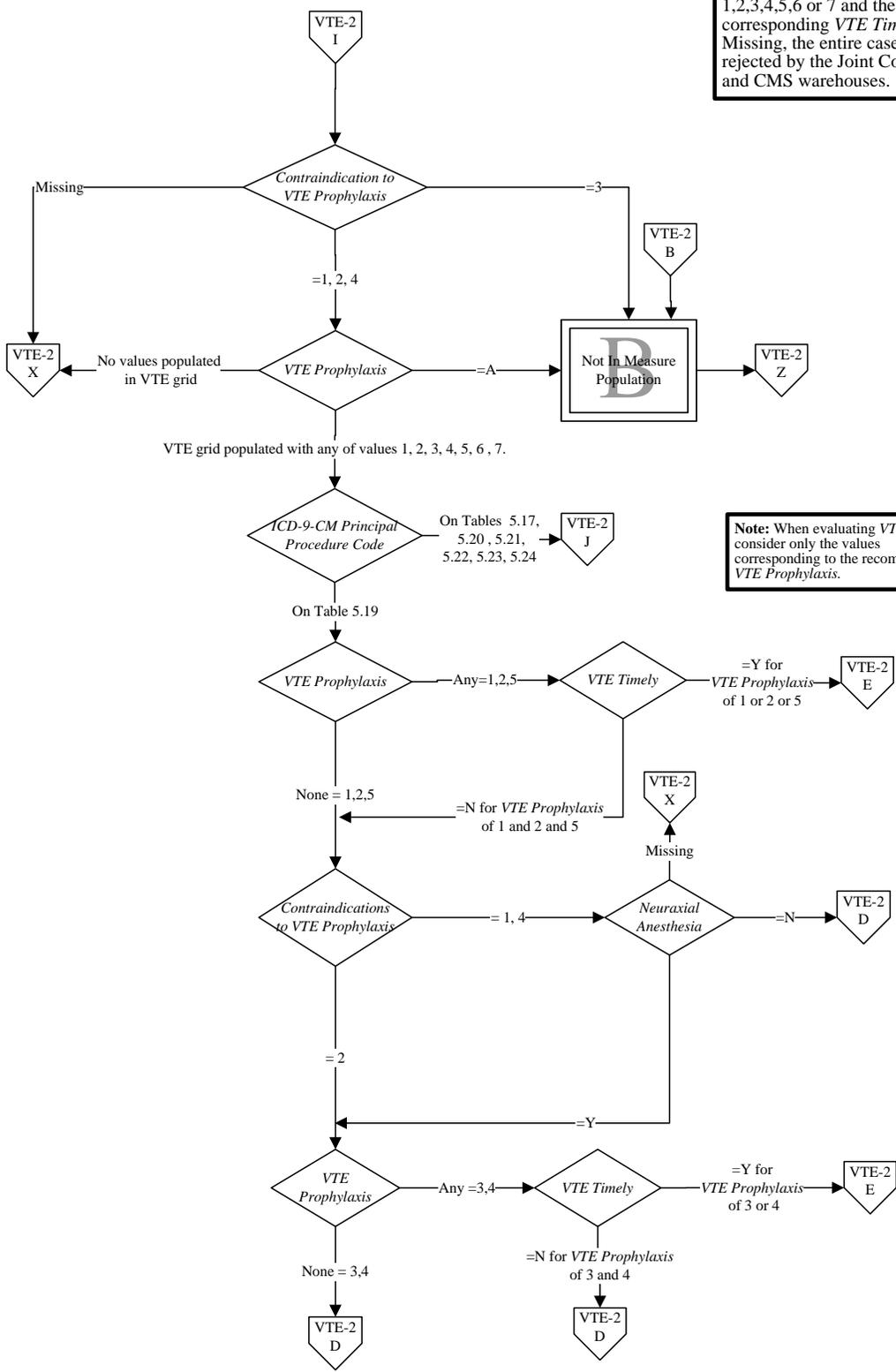
Denominator: All selected surgery patients.

Variable Key:
Surgery Length
Postop Day
Surgery Days





Note: If *VTE Prophylaxis* field is populated with an allowable value of 1,2,3,4,5,6 or 7 and the corresponding *VTE Timely* field is Missing, the entire case will be rejected by the Joint Commission and CMS warehouses.



Note: When evaluating *VTE Timely*, consider only the values corresponding to the recommended *VTE Prophylaxis*.

