



***Risk factors for bleeding (any of):**

1. Acute recent and/or life-threatening bleeding
2. High risk of GI bleeding [e.g., previous variceal bleed, angiodysplasia, treatment-associated toxicity]
3. High risk intracranial lesion [e.g., glioma]
4. Functional hepatic impairment [Child-Pugh class C]
5. Thrombocytopenia [$< 50 \times 10^9/L$]
6. Use of antiplatelet agents

Other factors to consider:

- » Patient preferences, after discussion of risks and benefits
- » Drug coverage and cost
- » Body weight (consider LMWH in patients with weight > 150 kg and agent with weight-adjustable dosing in patients with weight < 50 kg)
- » Burden of cancer (e.g., recurrence or progression) and burden of VTE (consider LMWH for patients with severe symptoms, e.g., iliofemoral DVT, submassive PE, any thrombolysed patient)
- » Significant GI surgery or absorption disorders (consider LMWH for patients with impaired GI absorption)

** Pharmacist led pharmacokinetic review
DVT = deep vein thrombosis

PE = pulmonary embolism
LMWH = low molecular weight heparin

DOAC = direct oral anticoagulant