

Oxford University Hospitals 
NHS Trust

Information for patients
attending the
DVT Clinic

The Anticoagulation &
Thrombosis Team

What is a Deep Vein Thrombosis, known as a DVT?

A DVT is a blood clot that forms in a deep vein, usually in the leg. Veins are the blood vessels that take blood towards your heart. Deep leg veins are the larger veins that go through the muscles of your calf and thigh. A DVT is a blood clot that partly or completely blocks these deep veins.

Information about the DVT Clinic

This is an out-patient service for the diagnosis and treatment of DVT. It is based in the Oxford Haemophilia & Thrombosis Centre at the Churchill Hospital. Most people are referred to the clinic by their General Practitioner (GP). Your GP will arrange an appointment time and give you a letter, which you should give to the receptionist when you arrive. There are 'disabled' parking spaces opposite the entrance to the centre, which you can use for your first appointment. There are machines for hot and cold drinks in the waiting area. Please allow about 2 hours to be assessed and have tests. If you are then found to have a DVT you will need to stay longer (up to 3 hours).

At the weekend and on Bank Holidays the DVT Clinic is held in John Warin Ward (next door to the Oxford Haemophilia & Thrombosis Centre). You should wait in the waiting area outside the ward and the Thrombosis Nurse will come and meet you. You do not need to let the ward staff know that you are there.

What should I expect?

Nursing assessment – you will be seen by a specialist Thrombosis Nurse who will assess you to find out whether you are likely to have a DVT. This includes examining your legs and asking you about your symptoms and medical history.

Blood Test – you may have a blood test (which is known as a D-dimer test). This involves taking some blood from a vein in your arm.

For some patients a negative result means that you do not have a DVT. Your symptoms, such as pain or swelling, must be caused by something else. You will need to go back and see your GP. If the

result is positive it means that you may have a DVT, but not that you definitely do. A positive result can be caused by other things such as infection or inflammation. The Thrombosis Nurse will explain your blood test results to you.

Ultrasound scan – if a DVT cannot be excluded with a D-dimer test you will have an ultrasound scan. Usually the upper part of your leg only is scanned (behind the knee and the thigh), even if your symptoms are in your lower leg. This is because clots extending above the knee are the important ones that must be treated. The symptoms you have in your lower leg may also be there because of a clot in your upper leg.

If your first ultrasound scan shows that you do not have a DVT in your upper leg you may still need to come back after one week for a second scan. This will be explained to you by the Thrombosis Nurse.

What happens if I can't get a scan on the day I am referred?

You will usually have a diagnosis on the day that you are referred. If you are referred in the afternoon you may not be able to have an ultrasound scan until the following day. You may then be given an anticoagulant as either a tablet or an injection. Anticoagulants are used in the treatment of DVT and are given to you before your first scan in case you do have a DVT. You may be given this by your GP.

What happens if I am diagnosed with a DVT?

If you have a confirmed DVT you will need to come to the DVT Clinic for treatment. You will be seen by a doctor at the Clinic during this time.

A separate leaflet called 'Information for Patients with a Confirmed DVT' gives more information about this.

If you need an interpreter or need a document in another language, large print, Braille or audio version, please call

01865 221473 or email **PALSJR@ouh.nhs.uk**

