YOU are more at risk of developing a BLOOD CLOT after surgery or a procedure than when you take a long-distance flight.

**What can YOU do to reduce your RISK?**

<table>
<thead>
<tr>
<th>WATER</th>
<th>ACTIVITY</th>
<th>COMPRESSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drink the recommended amount of water</td>
<td>Adequate water intake helps blood stay fluid for good blood flow. Reduced water intake could thicken the blood.</td>
<td></td>
</tr>
<tr>
<td>Keep active</td>
<td>Frequent light activity (e.g. getting up, walking around and leg exercises) helps to move blood around the legs, reducing the risk of blood sitting and clotting in the veins.</td>
<td></td>
</tr>
<tr>
<td>Wear compression stockings</td>
<td>Compression stockings squeeze the legs, reducing the diameter of the veins and improving blood flow.</td>
<td></td>
</tr>
</tbody>
</table>

**My risk factors**

Blood clots can develop in your legs and pelvis and can be dangerous if they travel through your body and block blood supply to your lungs.

Admission to hospital to undertake treatment puts you at HIGH risk of BLOOD CLOTS.

If any of the following apply, YOU are at HIGHER RISK of developing a blood clot (ask your doctor what blood clots treatment is needed).

- [ ] I am having a surgical operation or procedure
- [ ] I have had a blood clot in the past
- [ ] Someone in my family has had a blood clot
- [ ] I am a smoker
- [ ] I have cancer and/or am undertaking cancer treatment or therapy
- [ ] I have a chronic illness/blood disease
- [ ] I have varicose veins
- [ ] I am over 40 years old
- [ ] I am overweight
- [ ] I am pregnant or have recently given birth
- [ ] I am on the contraceptive pill
- [ ] I am undertaking hormone replacement therapy
- [ ] I am on steroids
- [ ] I have not been physically active (e.g. walking) recently
- [ ] I have recently taken a long-distance flight

Want more information? www.southerncrosshospitals.co.nz/patient-information/blood-clots
My recovery plan

Your doctors, nurses and the information on our website can help you to complete your plan.

My discharge date: _____________________________________

How much water should I drink everyday for the next 8 weeks? ________________________________________________

My activity prescription

Week 1 _______________________________________________
Week 2 _______________________________________________
Week 3 _______________________________________________
Week 4 _______________________________________________
Week 5 _______________________________________________
Week 6 _______________________________________________
Week 7 _______________________________________________
Week 8 _______________________________________________

How long should I wear my compression stockings? __________________________________________________________

Medication plan: __________________________________________________________________________________________
______________________________________________________________________________________________

Your checklist to:

☐ Complete the pre-admission risk assessment
☐ Ask your doctor what blood clots treatment is needed
☐ Bring this brochure into hospital
☐ Before you go home, ensure you understand what to do, talk with your nurses and doctors and write up your recovery plan.

If applicable:
I understand my blood thinning medication plan:
☐ Before coming to hospital
☐ When I go home.

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