



Royal Berkshire
NHS Foundation Trust

**Coming to the DVT
Clinic at the Royal
Berkshire Hospital
Information for patients**

This leaflet explains what you can expect on your first visit to the DVT Clinic at the RBH. If there is anything you don't understand or if you have a question or concern, please ask a member of the team – they will be happy to help.

What is a Deep Vein Thrombosis (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 outpatient service for the diagnosis and treatment of DVT. It is based in the Ambulatory Emergency Care Unit (AECU) at Royal Berkshire Hospital (RBH).

You are likely to have been referred to the clinic by your family doctor (GP). Your GP will arrange an appointment time and give you a letter, which you should give to the receptionist when you arrive.

Please allow two hours to be assessed and have tests. If you are found to have a DVT, you will need to stay longer (possibly up to three hours).

What should I expect?

Nursing assessment

You will be seen by a specialist nurse, who will assess you to find out whether you are likely to have a DVT. This assessment 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. This test helps us to calculate your risk of having a DVT.

For some patients a negative result from this blood test may mean that you are unlikely to have a DVT and your symptoms, such as pain or swelling, are likely to be caused by something else. You may be advised 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 specialist nurse will explain your blood test results to you.

Ultrasound scan

If a DVT cannot be ruled out with a D-dimer blood test, you will have an ultrasound scan. Usually only the upper part of your leg is scanned (behind your knee and 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 be there because of a clot in your upper leg.

If your ultrasound scan shows that you do not have a DVT in your upper leg, you may need to come back after one week for a second scan. This will be explained to you by the specialist 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, but if you are referred in the afternoon you may not be able to have an ultrasound scan until the following day.

If this happens, you may be given an anticoagulant as either a tablet or an injection. Anticoagulants are used in the treatment of a DVT, to increase the length of time it takes your blood to clot. You will be given this medication before your first scan, in case you do have a DVT.

Alternatively, you may be given it by your GP or in the Emergency Department (A&E), before you come to the DVT Clinic.

What happens if I am diagnosed with a DVT?

If a DVT is confirmed you will be started on treatment by the specialist nurse.

How to contact us

If you have questions or concerns, please contact us.

DVT Clinic, AECU

Level 1 Main Entrance

Craven Road

Tel 0118 322 7461/7494

Mon – Fri 8.00am–4.00pm

Based on a leaflet by Oxford University Hospitals NHS Foundation Trust

This document can be made available in other languages and formats upon request.

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