## Caprini Risk Assessment Score

Add 1 point for each of the following statements that apply		Add 2 points for each of the following statements that apply:	
	Age 41-60 years  Minor surgery (less than 45 minutes) is planned  Past major surgery (more than 45 minutes) within the last month  Visible varicose veins  A history of Inflammable Bowel Disease (IBD) (for example, Crohn's disease or ulcerative colitis)	□ Age 61–74 years     □ Current or past malignancies (excluding skin cancer, but not melanoma)     □ Planned major surgery lasting longer than 45 minutes (including laparoscopic and arthroscopic)     □ Non-removable plaster cast or mold that has kept you from moving your leg within the last month     □ Tube in blood vessel in neck or chest that delivers	
	Swollen legs (current)  Overweight or obese (Body Mass Index above 25)  Heart attack  Congestive heart failure	blood or medicine directly to heart within the last month (also called central venous access, PICC line or port)  Confined to a bed for 72 hours or more	
	Serious infection (for example, pneumonia)	Add 3 points for each of the following statements that apply:	
	Lung disease (for example, emphysema or COPD)  On bed rest or restricted mobility, including a removable leg brace for less than 72 hours	☐ Age 75 or older ☐ History of blood clots, either Deep Vein Thrombosis (DVT), or Pulmonary Embolism (PE)	
	Other risk factors (1 point each)***	☐ Family history of blood clots (thrombosis)	
***Additional risk factors not tested in validation studies but shown in the literature to be associated with thrombosis include BMI above 40, smoking, diabetes requiring insulin, chemotherapy, blood transfusions, and length of surgery over 2 hours.		☐ Personal or family history of positive blood testing indicating an increased risk of blood clotting	
		Add 5 points for each of the following statements that apply:	
Add 1 point for each of the following statements that apply:		☐ Elective hip or knee joint replacement surgery	
	Current use of birth control or Hormone Replacement Therapy (HRT)	☐ Broken hip, pelvis or leg	
	Pregnant or had a baby within the last month	<ul> <li>Serious trauma (for example, multiple broken bones due to a fall or car accident)</li> </ul>	
	History of unexplained stillborn infant, recurrent spontaneous abortion (more than 3), premature birth with toxemia or growth restricted infant.	☐ Spinal cord injury resulting in paralysis	

Caprini J. Venous resource center. URL: venousdisease.com.

## L-TriP(cast) Score Based On The Clinical Risk Prediction Model

Environmental Predictor Variable	Point Variable
Age ≥ 35 and < 55 y	2
Age ≥ 55 y	3
Male sex	1
Current use of oral contraceptives	4
Cancer within the past 5 y	3
Pregnancy or puerperium	3
BMI $\geq$ 25 and $<$ 35 kg/m <sup>2</sup>	1
BMI 35 ≥ kg/m <sup>2</sup>	2
Pneumonia	3
Family history of VTE (first-degree relative)	2
Comorbidity (rheumatoid arthritis, chronic kidney disease, COPD, multiple sclerosis)	1
Hospital admission within the past 3 mo	2
Bedridden within the past 3 mo	2
Surgery within the past 3 mo	2
Superficial vein thrombosis	3
Plaster cast: lower leg	4

Nemeth B, Adrichem RA, Hylckama VA, Bucciarelli P, Martinelli I, Baglin T, et al. Venous thrombosis risk after cast immobilization of the lower extremity: derivation and validation of a clinical prediction score, L-TRiP (cast), in three population-based case-control studies. PLoS Med 2015 Nov 10:e1001899.

## Risk Factors For Venous Thromboembolism During The Management Of Foot And Ankle Conditions

Patient Specific	Treatment Specific	Surgery/Injury Specific
Primary		
Personal history of VTED	Immobilization > 4wks	
Hypercoagulability		
Active/recent (<6 mo) cancer		
Secondary		
Advanced age (> 60)	Non-weightbearing	Achilles tendon rupture‡
Obesity (BMI > 30)	Hospitalization	Ankle fracture‡
Family history of VTED	Bed rest	Total ankle replacement
OCP or HRT use†		Hindfoot arthrodesis
Varicose veins		General anesthesia
Diabetes mellitus or > 1		
comorbidity		
Severe foot/ankle injury		

<sup>†</sup> Consider also if patient is a current smoker, as this may further VTED risk.

Fleischer AE, Abicht BP, Baker JR, Boffeli TJ, Jupiter DC, Schade VL. American College of Foot and Ankle Surgeons clinical consensus statement: risk, prevention, and diagnosis of venous thromboembolism disease in foot and ankle surgery and injuries requiring immobilization. J Foot Ankle Surg 2015;54:497-507.

<sup>‡</sup> Includes operative and nonoperative management.