9.08 Do we appropriately investigate our patients with Pulmonary Emboli to stratify severity using local management guidelines?

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Pulmonary embolism (PE) is a common presentation to acute hospitals. A local guideline based on the 2019 European Society of Cardiology guidelines was developed to optimise management of patients diagnosed with a PE and guide thrombolysis administration. It uses laboratory and radiologic investigations along with vital signs to stratify patients with PE into non-massive, low risk submassive, high risk submassive and massive, to guide management accordingly, based on severity. This audit was preformed to assess adherence to this PE management guideline. All patients discharged with a diagnosis of PE over a 6-month period (January 2022- June 2022) were identified, and charts reviewed to assess if patients had the required investigations done namely echocardiogram, arterial blood gas (ABG), Troponin, BNP and lactate levels. 43 patients were initially identified. Only 25 charts were available for inclusion (n=25). Of these patients, only 36% had an ABG (n=9), 60% (n=15) had an echocardiogram, 32% (n=8) had a BNP test, while 72% (n=18) had a troponin checked. Only 1 patient had all 5 relevant investigations done. This highlights a lack of awareness of how to stratify PE severity and the potential for improving management of PEs with increased education around this local guideline.

Conflict of Interest: None to declare