

3.13 Clinical Audit of Pulmonary Embolism (PE) management at discharge in a tertiary referral centre

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Background: We examined PE care in Beaumont Hospital in terms of symptoms, investigations and follow-up management and its adherence to international standards.

Methods: We looked at written and electronic data of PE admissions to Beaumont Hospital over a 6 month period in 2022 and compared care to guidance laid out in the 2019 ESC guidelines for PE management.

Results: Data from a total of 171 patients was included. Appropriate anticoagulation was commenced in 96% of patients. Recognised diagnostic algorithms were used in 88% of cases. Risk factors for PE were assessed for in 85% of cases. Appropriate risk stratification after diagnosis occurred in 77% of cases. 52% of patients underwent a right heart assessment. Haematology were consulted in 54% of cases. 78% of patients were reassessed as outpatients after 3-6 months.

Conclusions: Overall there was good adherence to the guidelines in terms of the work-up of patients with a suspicion for PE. However, there were several deficiencies identified in terms of post-diagnostic care and follow-up management. Since this audit period a specialist Coagulation service has been set up and access to diagnostics has been improved. The impact of these changes will be assessed in the next audit cycle.

Disclosures: the authors declare that they have no conflicts of interest.