

Program to safely reduce **VTE prophylaxis best practice alert (BPA)** firings

PROBLEM

Venous thromboembolism (VTE) prophylaxis prevents thrombosis in patients, and must be delivered promptly. The VTE prophylaxis alert is currently problematic; it fires over 5 times per patient per encounter and is over-ridden more than 90% of the time.

This project aimed to reduce the number of alert firings & make the alert more user friendly, without reducing the rate of timely VTE.

INTERVENTIONS

We made two changes to the alert: (1) simplified, shortened and grouped the acknowledgement reasons, and (2) created an RCT where patients were randomized either to the old alert (which fired for every staff member opening MyChart), or to the new alert (which fired **only** for the first contact provider and the attending).

New alert with reduced acknowledgement reasons

Previous acknowledgement reasons

RESULTS

Alert firings decreased by an average of 0.6 per patient encounter, with 80 fewer alerts per day. VTE remained timely, with no increase in VTE cases. **When implemented, this will prevent around 40,000 alerts per year.**

