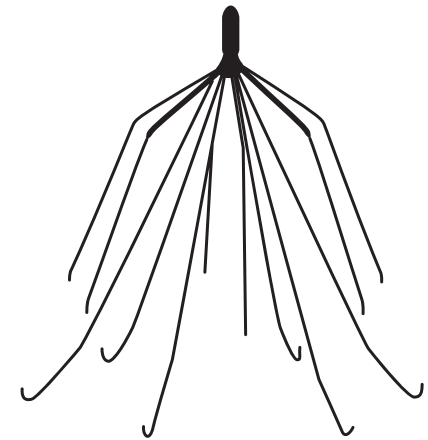


Inferior Vena Cava (IVC) Filters

Physician Information



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Why should your patients' IVC filter be removed?

IVC filters are associated with significant long-term complications including:

- Filter thrombosis or IVC thrombosis
- Filter migration
- Filter erosion through the IVC wall
- Filter fracture and embolization
- Filter tine penetration through the IVC wall

To reduce the risk of long-term complications, IVC filters should be removed as soon as protection from PE is no longer needed.

Why did your patient receive an IVC filter wristband?

A recently completed study at VGH demonstrated that the introduction of our IVC filter management plan (consisting of an IVC filter identification wristband and outpatient follow-up through the Thrombosis Clinic) was associated with a 20% increase successful filter retrieval compared to historical data.

How does the wristband work?

A wristband containing written information that the patient has a retrievable IVC filter is placed at the time of filter insertion. It serves as a visible reminder that the patient has an IVC filter in situ.

The wristband should only be removed in one of the following three situations:

- The filter is removed prior to hospital discharge.
- Decision has been made to leave in the filter permanently.
- The patient has been referred to an outpatient provider (local internist or Thrombosis Clinic) to follow the patient to facilitate and track filter removal after discharge.

Outpatient Clinic Referral

- For outpatient referrals, a referral letter can be faxed to the local outpatient follow-up clinic (please see below for contact information). If the patient is being discharged or transferred to another facility, please include the facility name and contact information so we can contact the patient.

Outpatient Clinic Contact Information

