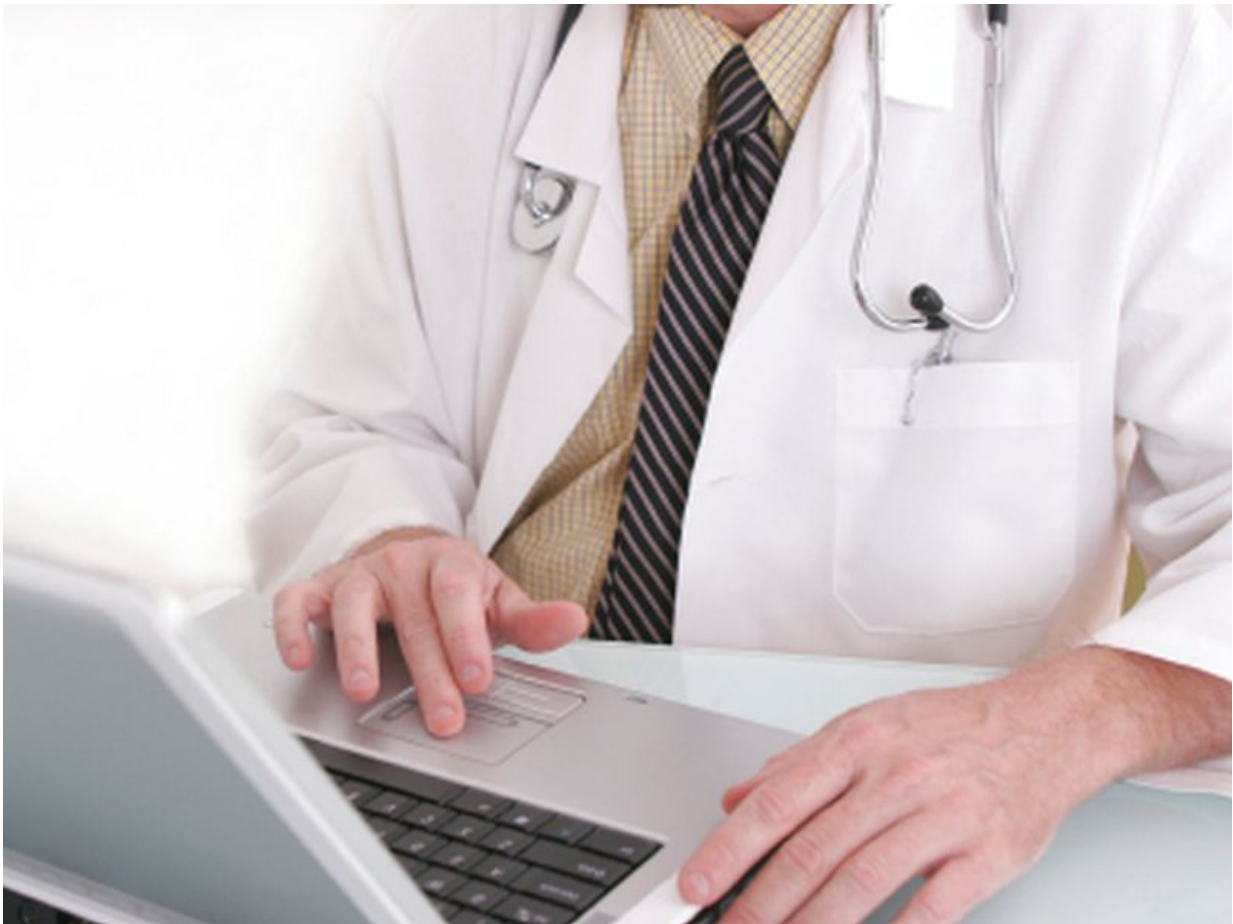


Electronic alert doesn't up appropriate thromboprophylaxis

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(HealthDay)—A computer-based alert system with a Geneva Risk Score

calculation tool in the electronic patient chart does not improve appropriate thromboprophylaxis in patients admitted to general medical wards, according to a study published online Aug. 24 in the *Journal of Thrombosis and Haemostasis*.

David Spirk, M.D., from the University of Bern in Switzerland, and colleagues implemented a computer-based alert system combined with a Geneva Risk Score [calculation](#) tool in the electronic patient chart and order entry system to improve thromboprophylaxis use. Patients admitted to general medical wards were randomized to the alert group (804 patients) or the control group (789 patients).

The researchers found that 66.7 percent of patients from the alert and control groups were administered appropriate thromboprophylaxis. Overall, 55.5 percent of patients in the alert group had no score calculation by the physician in charge or had a calculated score result that was inconsistent with information from the patient chart. Compared with patients with a consistent score result, [patients](#) with no score or inconsistent score result less often had appropriate thromboprophylaxis administered (62.6 versus 71.8 percent).

"The e-alert system did not improve appropriate thromboprophylaxis, most likely because many e-alerts were ignored by ordering physicians," the authors write. "The use of appropriate thromboprophylaxis in the [control group](#) was higher than expected."

Two authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract](#)
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