

# Quality improvement effort cuts blood clots in brain injury patients

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more likely to receive anticoagulation (odds ratio, 10.8; 95 percent confidence interval, 6.9 to 16.7; P

"When appropriate decisions about using benchmarked data are combined with interventions tailored to the local context, the potential for application of benchmarked data to improve care at the bedside is high," write the authors of an accompanying editorial.

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(HealthDay)—Implementation of an anticoagulation protocol reduces blood clots in patients with traumatic brain injury (TBI), according to a study published in the April 1 issue of *The Joint Commission Journal on Quality and Patient Safety*.

Christopher J. Tignanelli, M.D., from the University of Minnesota Medical School in Minneapolis, and colleagues evaluated the institutional implementation of a prophylactic anticoagulation protocol in patients with TBI. The analysis included 681 patients with TBI (368 preimplementation and 313 postimplementation).

The researchers found that after implementation of the venous thromboembolism (VTE) protocol, more patients received anticoagulation (preprotocol: 39.4 percent; postprotocol: 80.5 percent), time to initiation was shorter (preprotocol: 140 hours; postprotocol: 59 hours), and there were fewer VTE events (preprotocol: 5.2 percent; postprotocol: 2.2 percent). Postprotocol [patients](#) were significantly

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