Primary prophylaxis for ambulatory patients with cancer receiving systemic therapy

Outpatient primary thromboprophylaxis recommendations depend on patient risk stratification. Classification of patients as being low-, intermediate- or high-risk for VTE should be based on a validated risk-assessment tool complemented by clinical judgment and experience. Thromboprophylaxis recommendations must be considered in the context of patient bleeding risk.

Table 3. Primary prophylaxis in ambulatory patients with cancer receiving systemic therapy

Thrombosis Risk	ASH Recommendation
Low risk for thrombosis ¹	The ASH guideline panel recommends against parenteral thromboprophylaxis.

ASH CLINICAL PRACTICE GUIDELINES VENOUS THROMBOEMBOLISM (VTE)

Primary Prophylaxis
of Venous
Thromboembolism (VTE)
in Patients
with Cancer

A POCKET GUIDE FOR THE CLINICIAN OCTOBER 2023

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For expert consultation on VTE in patients with cancer and other hematologic diseases, submit a request to the ASH Consult a Colleague program at www.hematology.org/Consult (ASH members only).



Primary prophylaxis for patients with cancer undergoing surgery

Patients with cancer undergoing surgery can have an increased risk of thrombosis, as both cancer and surgery are significant risk factors for VTE. However, surgery can increase the risk of bleeding, which should be taken into account as well.

Table 2. Primary prophylaxis for patients with cancer undergoing surgery

