Timely administration of Enoxaparin following caesarean section for VTE prevention: A retrospective audit

Northern Health

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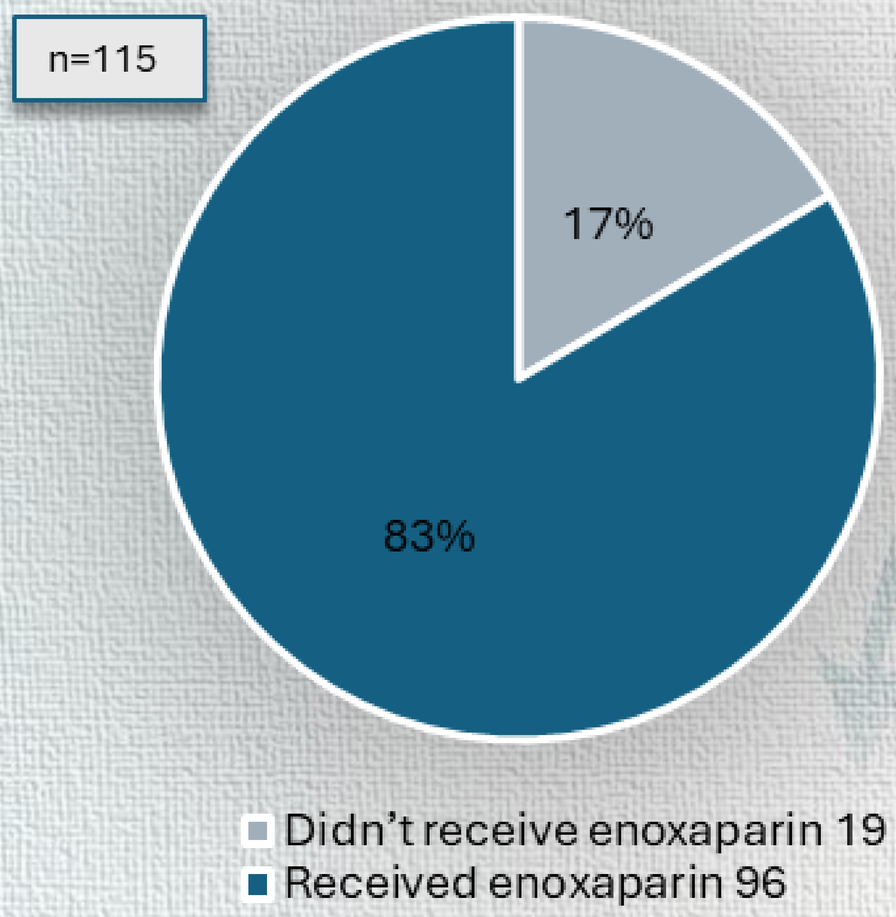
RESEARCH WEEK
20-24 OCTOBER 2025
INSPIRED RESEARCHERS
Northern Health

Aim:

To assess whether the timing of enoxaparin administration for venous thromboembolism(VTE) prophylaxis after caesarean section aligns with hospital protocols and international clinical guidelines.

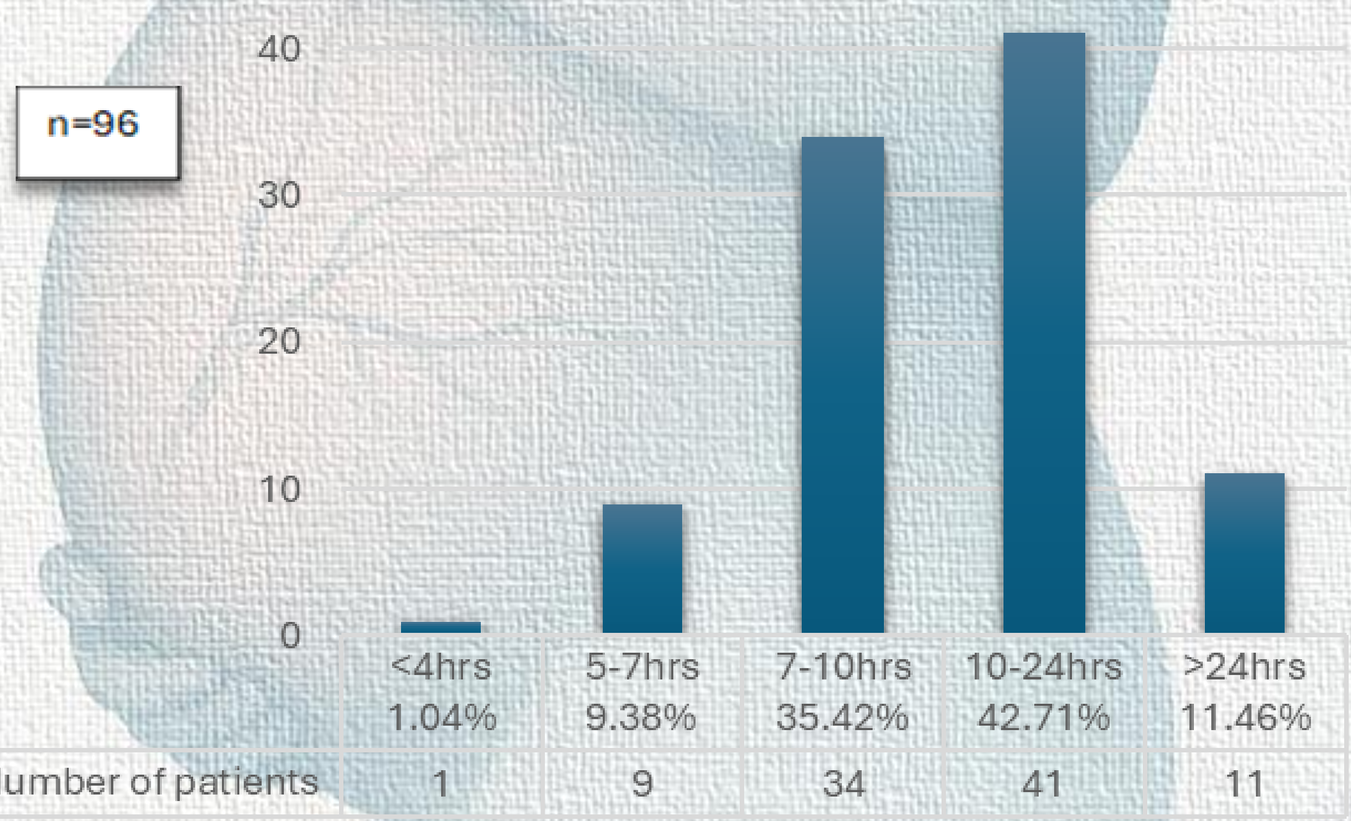
% of patients given Enoxaparin



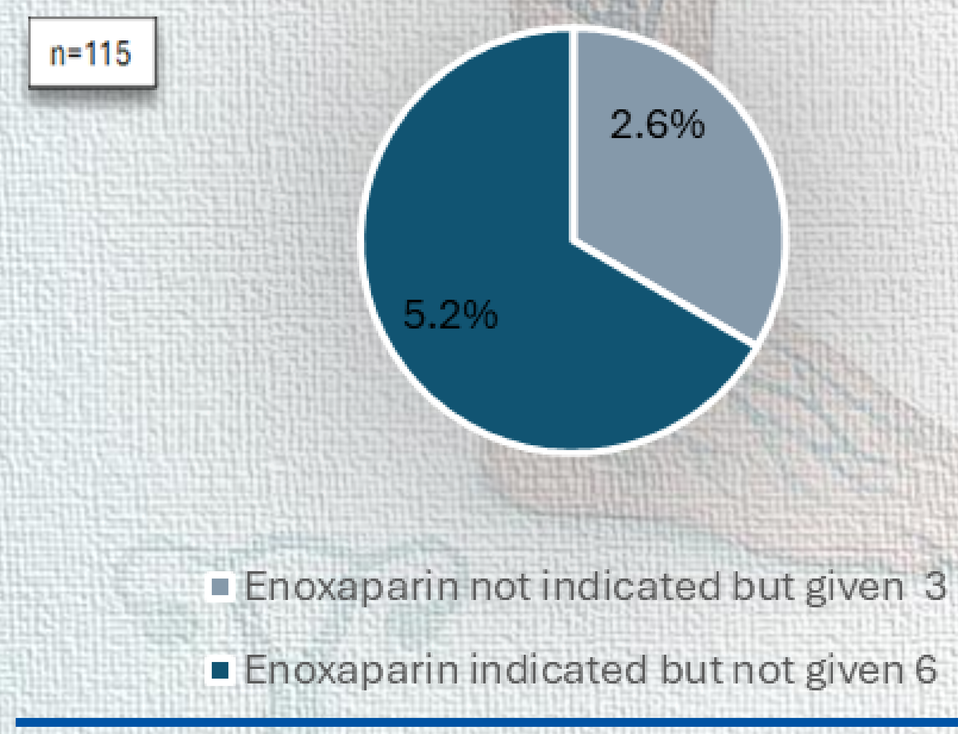
Methods:

A retrospective audit was conducted in the obstetrics department of the Northern Hospital over 1 month (1st Nov-30th Nov 2024). Medical records of 115 post-caesarean patients were reviewed. Data collected included time of neuraxial manipulation, type of anaesthesia, timing of first enoxaparin dose, and documentation of VTE risk factors. Compliance was assessed against local thromboprophylaxis protocols (The Northern Hospital and Queensland Pregnancy and Puerperium Guidelines) and international recommendations (New York School of Regional Anaesthesia and SOMANZ).

Timing of Enoxaparin administration after neuraxial manipulation



Enoxaparin use vs clinical indication



Conclusions:

Over 90% of patients received enoxaparin outside the recommended time, potentially increasing the risk of bleeding or VTE. Contributing factors included limited staff education and a new electronic VTE risk assessment form. Educational initiatives are being implemented, and the electronic tool is being revised to improve clarity, accessibility, and usability. A follow-up audit is planned to evaluate the impact of these interventions on clinical practice and patient safety.