Patient & Family Guide

Deep Vein Thrombosis (DVT) and Pulmonary Embolism (PE)



Deep Vein Thrombosis (DVT) and Pulmonary Embolism (PE)

This pamphlet will help you learn about deep vein thrombosis (DVT) and pulmonary embolism (PE). This includes symptoms of DVT and PE.

You must know these symptoms so you can get medical care right away.

What is a deep vein thrombosis (DVT)?

Blood flows quickly through your veins.
 Usually, it does not clot (thicken into a clump).
 A DVT is a blood clot that forms in a deep vein in a limb (like your arm or leg). The clot may get big enough to block the flow of blood in that limb.

What is a pulmonary embolism (PE)?

- A PE is when a blood clot(s) breaks off and goes to 1 or both of your lungs. If a clot gets stuck in an artery in your lung, it can block blood flow to the lung tissue.
- PE is usually prevented by taking anticoagulation (blood thinning) medications. This type of medication makes your blood less likely to clot.

Are DVTs and PEs dangerous?

 Yes. A blood clot can block blood flow and affect the circulation (movement) of blood in your arm or leg. If part of the clot breaks off and moves to your lung, you could die.

What are the symptoms?

Call your primary health care provider right away if you have:

DVT symptoms:

- Pain in your arm or leg that:
 - is sharp and sudden (like a muscle cramp)

or

- happens over time and gets worse when you move (like when bending your arm or walking)
- Swelling in your arm or leg
- Redness in your arm or leg
- Tenderness or warmth in your arm or leg

PE symptoms:

- Sudden shortness of breath or trouble breathing
- Sharp, stabbing pain in your chest or back when you breathe in
- · Coughing up blood

If you cannot reach them, call 911 or go to the nearest Emergency Department right away.

- It can be hard to diagnose a PE because the symptoms may be similar to other conditions.
- If you have any symptoms of a PE, call 911 or go to the nearest Emergency Department right away.

Why do blood clots form?

- A blood clot or DVT can happen for no clear reason. You may be at a higher risk of a blood clot if you:
 - have recently had surgery or trauma (like a car accident or a broken hip).
 - are immobile (not able to move).
 - have an inherited (passed down from your family) condition.
 - are taking certain medications (like birth control pills or hormone replacement therapy).
 - have damage to the inside lining of a vein from an injury or an earlier DVT.
 - > are pregnant.
 - > are overweight.
 - are an older adult.
 - have a serious illness (like cancer).

How are DVTs and PEs treated?

 Most people who have a DVT or a PE can be treated as an outpatient (not admitted to the hospital). Your primary health care provider (family doctor or nurse practitioner) will decide what treatment is best for you.

If you have had a DVT or PE:

 You may be given an anticoagulant medication, like:

> Warfarin

 Dabigatran etexilate

Apixaban

→ Dalteparin

> Rivaroxaban

> Edoxaban

- If the DVT is in your leg, raise the affected leg when you are sitting.
- It is best to stay active during your recovery.
 Stop and rest if you have pain or discomfort in your arm or leg, or are short of breath.
- If you need medication for discomfort or pain, take acetaminophen (Tylenol®).
- Do not take these medications while you are taking an anticoagulant, unless your primary health care provider or pharmacist tells you otherwise.
 - ASA (Aspirin®)
 - > Ibuprofen (Advil® or Motrin®)

How can I lower my risk of having another DVT or PE?

- Keep taking your anticoagulant medication, unless you are told by a health care provider to stop the medication.
- Exercise. Move your legs to keep the blood flowing.
- Keep a healthy weight. Weighing less puts less pressure on your legs.
- Avoid long periods of sitting or standing.
 Change your position often to help with blood flow. If you are taking a long flight, get up and walk around, if you can.

What are your questions?

Please ask a member of your health care team. We are here to help you.

Notes:			

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

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Prepared by: Hematology Services, QE II Designed and Managed by: Library Services

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