

Your virtual ward: Pulmonary embolism

This leaflet is for patients who have been discharged home following a diagnosis of a pulmonary embolism (PE). It explains how you can monitor yourself at home to make sure your body's oxygen levels, heart rate and blood pressure remain safe.

Virtual ward tel: 0118 322 5201 (9am-5pm, Mon-Sun)

Out of hours: 111 or 999

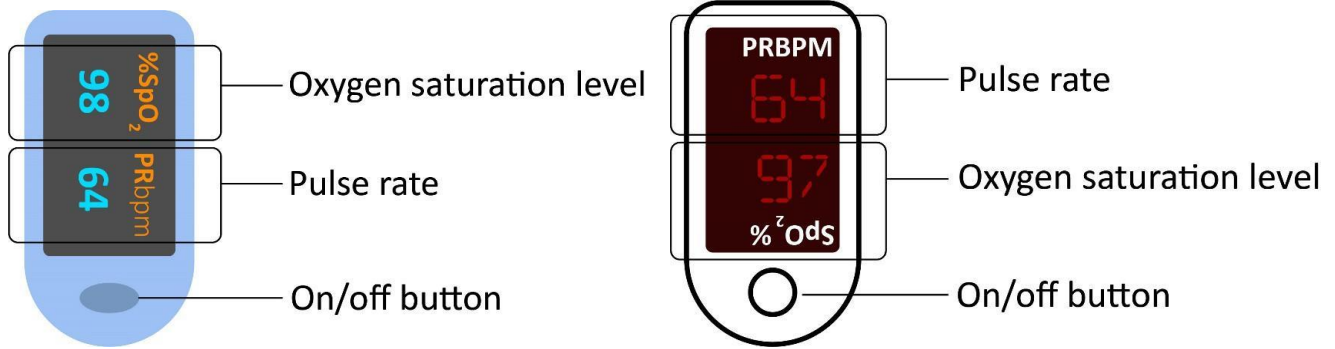
What is a virtual ward?

The purpose of our virtual ward is to monitor you while allowing you to stay in the comfort of your own home. Your clinician has determined that you are safe to go home today, but some people may get worse. For this reason, you were given a pulse oximeter and a blood pressure monitor. By checking the readings on these two devices, we can make sure that you are improving. If you do become more unwell, we can take appropriate actions in a timely manner.

Using your pulse oximeter

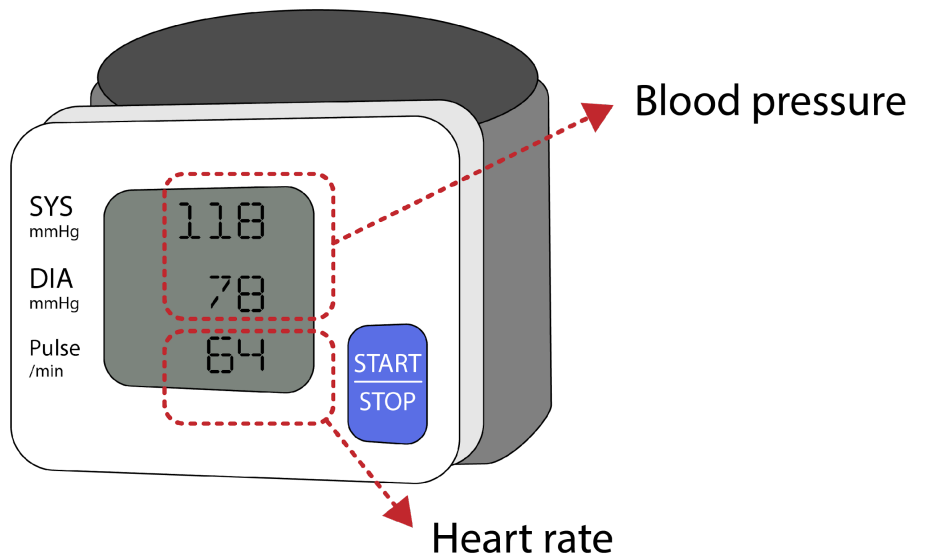
- Clip the oximeter onto your finger
- Make sure your fingers are warm
- Remove any nail varnish before attaching the probe
- Sit up straight and rest for a few minutes before taking measurements
- After 5–10 seconds, the probe will give you two different numbers – an oxygen saturation level (abbreviated to SpO2) and a pulse rate (abbreviated to PR or BPM)
- Make a note of both readings





Using your blood pressure monitor

- Ensure you are sat down comfortably and rest for a few minutes before taking the readings.
- Attach the cuff to your wrist, against your skin (and not over clothing).
- Press the START/STOP button to start measuring your blood pressure – the cuff will pump up, which may feel a bit uncomfortable for a short period.
- The monitor will give you three readings.
 - The top two readings are your blood pressure.
 - The bottom number is your heart rate.
- The full manual can be found if you search on the internet for “Omron RS1 manual”.



Recording oxygen levels and blood pressure

- Record your oxygen levels, your heart rate and your blood pressure 4 times a day.

Day	Morning			Midday			Afternoon			Evening		
	Oxygen	Heart rate	Blood pressure	Oxygen	Heart rate	Blood pressure	Oxygen	Heart rate	Blood pressure	Oxygen	Heart rate	Blood pressure
Day 1												
Day 2												
Day 3												
Day 4												
Day 5												

Virtual appointments

- Our team will phone you every day until we determine you are getting better.
- We will ask about your symptoms and ask you to give us a reading from your pulse oximeter and your blood pressure monitor.
- If you have not heard from us by 1pm on the first day after you were sent home from hospital, call our virtual ward phone number (at the top of the first page)

Alarm signs and what to do next

Seek help via our virtual ward number, 111 or 999 in the following cases:

- If your oxygen saturations are **persistently 94% or less**.
- If the top number of your blood pressure is **persistently less than 100**.
- If your heart rate is **persistently greater than 110**.
- If you are **more short of breath**.
- If you feel **dizzy or light-headed**.
- If you develop **worsening chest pain**.
- If you have **uncontrolled bleeding or black stools (poo)**.
- During working hours, you can also call our virtual ward number if you are not sure.

If you have any questions or concerns, do not hesitate to call our virtual ward number – 0118 322 5201 – we are happy to help as we know this can be very stressful and scary.

Your blood thinning medications
General considerations

- Blood thinners will **increase your risk of bleeding**, so avoid injuries e.g., contact sports.
- Blood thinners can **interact with other medications** (including supplements you can get over the counter), so speak to your GP or virtual ward staff prior to making any changes.
- Blood thinners may **not be safe in pregnancy**, so speak to your doctor if you are pregnant or are planning on becoming pregnant.

For Apixaban (Eliquis)

- Take 10 mg of Apixaban twice a day for the first 7 days (you may have started taking this while in hospital).
- Reduce your dose to 5mg twice a day after 7 days.
- Remain on 5mg twice a day for at least 3 months, until you are seen by a lung doctor.
- Contact your GP for a repeat prescription.

For Tinzaparin injections

- Inject it under the skin.
- Inject this at roughly the same time every day.
- Vary the injection site daily.

Acute Medical Unit (AMU) / Your virtual ward (PE)

- Contact your local council to arrange collection of a full sharps bin.

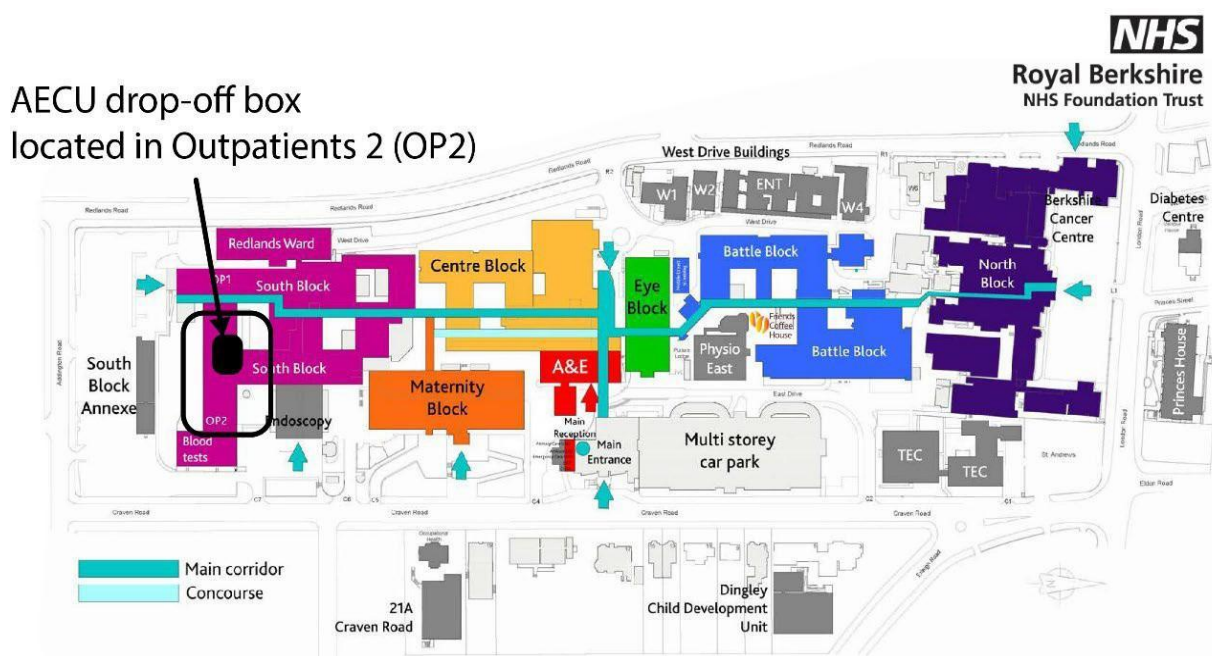
For Warfarin

- Your warfarin dose will depend upon your individual blood test results (INR).
- Please follow any guidance you received upon discharge from hospital, regarding where and when to have a repeat blood test.

Returning the pulse oximeter

Once you have recovered, please return the pulse oximeter to the drop-off box inside the Ambulatory Emergency Care Unit (AECU) in South Block– see map. Open Mon-Fri, 9am-5pm. You can keep the blood pressure monitor.

Do not go to the Emergency Department (A&E).



To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

Acute Medical Unit (AMU), March 2021

Next review due: March 2023

Compassionate

Aspirational

Resourceful

Excellent