APPENDICES

Pandor et al. Risk assessment models for venous thromboembolism in pregnancy and in the puerperium – a systematic review

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associated characteristics and composite clinical variables

APPENDIX S1 LITERATURE SEARCH STRATEGIES

Database searched: Ovid MEDLINE(R) Epub Ahead of Print, In-Process & Other

Non-Indexed Citations, Ovid MEDLINE(R) Daily, Ovid

MEDLINE and Versions(R)

Platform or provider used: Ovid SP

Date of coverage: 1946 to February 2021

Search undertaken: February 2021

- 1 Pregnant Women/ or exp Pregnancy Complications/ or exp Maternal Health Services/ or exp Fetal Monitoring/ or exp Prenatal Diagnosis/ or Perinatal Care/ or Labor pain/ or Analgesia, Obstetric/ or exp Obstetric Surgical Procedures/ or exp Postpartum Period/
- 2 (pregnan* or antenatal* or ante-natal* or prenatal* or pre-natal* or gestational* or matern* or perinatal* or peri-natal* or post-natal* or post-natal* or post-partum or puerper* or obstetric).mp.
- 3 1 or 2
- 4 pulmonary embolism/ or thromboembolism/ or venous thromboembolism/ or venous thrombosis/ or upper extremity deep vein thrombosis/
- 5 (((venous or vein) adj (thrombosis or thromboses or thrombus or thromboemboli*)) or (dvt or vte) or ((pulmonary or lung) adj3 (embolism or emboli or embolus or emboliz* or thromboemboli*))).ti,ab.
- 6 4 or 5
- 7 editorial/ or news/ or exp historical article/ or anecdotes as topic/ or comment/ or case report/ or (letter or comment).ti.
- 8 randomized controlled trial/ or random*.ti,ab.
- 9 7 not 8
- 10 animals/ not humans/
- 11 exp animals, laboratory/
- 12 exp animal experimentation/
- 13 exp models, animal/
- 14 exp rodentia/
- 15 (rat or rats or mouse or mice).ti.
- 16 9 or 10 or 11 or 12 or 13 or 14 or 15
- 17 6 not 16
- 18 (risk* adj2 assess*).ti,ab.
- 19 ((score* or scoring) adj2 (tool* or system*)).ti,ab.
- 20 ((risk* or predict* or prognos*) adj4 (tool* or rule* or index* or indices or score* or scoring or scale* or model* or system* or algorithm* or stratif* or criteria or calculat*)).ti,ab.
- 21 department of health.ti,ab,au.
- 22 (guidance or guideline*).ti,hw,pt.
- 23 18 or 19 or 20 or 21 or 22
- 24 17 and 23
- 25 3 and 24

Databases searched: EMBASE
Platform or provider used: Ovid SP

Date of coverage: 1974 to February 2021

Search undertaken: February 2021

- 1 exp pregnancy/ or maternal health service/ or exp pregnancy complication/ or exp fetus monitoring/ or exp prenatal diagnosis/ or exp perinatal care/ or exp obstetric analgesia/ or exp labor pain/ or exp obstetrics/ or obstetric analgesia/ or exp obstetric operation/ or puerperium/
- 2 (pregnan* or antenatal* or ante-natal* or prenatal* or pre-natal* or gestational* or matern* or perinatal* or peri-natal* or post-natal* or post-natal* or post-partum or puerper* or obstetric or labo?r).mp.
- 3 1 or 2
- 4 lung embolism/ or exp venous thromboembolism/ or exp vein thrombosis/ or upper extremity deep vein thrombosis/
- 5 (((venous or vein) adj (thrombosis or thromboses or thromboses or thromboemboli*)) or (dvt or vte) or ((pulmonary or lung) adj3 (embolism or emboli or embolus or emboliz* or thromboemboli*))).ti,ab.
- 6 4 or 5
- 7 editorial/ or comment/ or case report/ or (letter or comment).ti.
- 8 randomized controlled trial/ or random*.ti,ab.
- 9 7 not 8
- 10 exp animal/ not exp human/
- 11 (rat or rats or mouse or mice).ti.
- 12 9 or 10
- 13 6 not 12
- 14 (risk* adj2 assess*).ti,ab.
- 15 ((score* or scoring) adj2 (tool* or system*)).ti,ab.
- 16 ((risk* or predict* or prognos*) adj4 (tool* or rule* or index* or indices or score* or scoring or scale* or model* or system* or algorithm* or stratif* or criteria or calculat*)).ti,ab.
- department of health.ti,ab,au.
- 18 (guidance or guideline*).ti,hw,pt.
- 19 14 or 15 or 16 or 17 or 18
- 20 13 and 19
- 21 3 and 20

#21

#22

#23

#19 or #20 or #21

#18 and #22

Databases searched: Cochrane CENTRAL Register of Randomised Controlled

Trials & Cochrane Database of Systematic Reviews

Platform or provider used: www.thecochranelibrary.com
Date of coverage: Inception to February 2021

guidance or guideline* or "department of health"

Search undertaken: February 2021

#1 MeSH descriptor: [Pregnancy] explode all trees #2 MeSH descriptor: [Pregnancy Complications] 1 tree(s) exploded #3 MeSH descriptor: [Maternal Health Services] explode all trees #4 MeSH descriptor: [Fetal Monitoring] explode all trees #5 MeSH descriptor: [Perinatal Care] explode all trees #6 MeSH descriptor: [Labor Pain] explode all trees MeSH descriptor: [Analgesia, Obstetrical] explode all trees #7 #8 MeSH descriptor: [Obstetric Surgical Procedures] explode all trees #9 MeSH descriptor: [Postpartum Period] explode all trees (pregnan* or antenatal* or "ante-natal*" or prenatal* or "pre-natal*" or gestational* or #10 matern* or perinatal* or "peri-natal*" or postnatal* or "post-natal*" or postpartum or "post-partum" or puerper* or obstetric):ti,ab,kw (Word variations have been searched) #11 MeSH descriptor: [Pulmonary Embolism] explode all trees #12 MeSH descriptor: [Venous Thromboembolism] explode all trees #13 MeSH descriptor: [Venous Thrombosis] explode all trees #14 MeSH descriptor: [Upper Extremity Deep Vein Thrombosis] explode all trees ((venous or vein) near/2 (thrombosis or thromboses or thrombus or thromboemboli*)):ti,ab,kw OR ((dvt or vte)):ti,ab,kw OR ((pulmonary or lung) near/2 (embolism or emboli or embolus or emboliz* or thromboemboli*)):ti,ab,kw (Word variations have been searched) #1 or #2 or #3 or #4 or #5 or #6 or #7 or #8 or #9 or #10 #17 #11 or #12 or #13 or #14 or #15 #18 #16 and #17 #19 (risk* or predict* or prognos*):ti,ab,kw AND (tool* or rule* or index* or indices or score* or scoring or scale* or model* or system* or algorithm* or stratif* or criteria or calculat*):ti,ab,kw OR ((pulmonary or lung) near/3 (embolism or emboli or embolus or emboliz* or thromboemboli*)):ti,ab,kw (Word variations have been searched) (score* or scoring) near/2 (tool* or system*) #20

APPENDIX S2 LIST OF EXCLUDED STUDIES WITH RATIONALE

1. Abdul Sultan et al., 2013 ¹ Not a RAM for predicting the risk of developing VTE in pregnancy or the puerperium 2. Ahmadzia et al., 2016 ³ Abstract of included full text study (Ellis-Kahana 2020) 3. Alsayegh et al., 2010 ⁴ Not a RAM for predicting the risk of developing VTE in pregnancy or the puerperium 4. Bahl et al., 2010 ⁴ Not a RAM for predicting the risk of developing VTE in pregnancy or the puerperium 5. Banfield et al., 2013 ⁵ No relevant/useable outcome data 6. Bare et al., 2013 ⁵ No relevant/useable outcome data 7. Barros et al., 2017 ⁵ No relevant/useable outcome data 8. Barros et al., 2017 ⁵ No relevant/useable outcome data 9. Barros et al., 2010 ⁵ No relevant/useable outcome data 10. Barros et al., 2011 ¹¹ No relevant/useable outcome data 11. Bastek et al., 2011 ¹¹ No relevant/useable outcome data 12. Beckett et al., 2011 ¹¹ No relevant/useable outcome data 13. Berkin et al., 2015 ¹⁴ No relevant/useable outcome data 14. Blondon et al., 2015 ¹⁴ No relevant/useable outcome data 15. Blondon and Hugon-Rodin 2017 ¹⁵ Commentary 16. Campbell 2013 ¹⁶ No relevant/useable outcome data 17. Cavazza et al., 2010 ¹⁰ No relevant/useable outcome data 18. Chauleur et al., 2016 ¹¹ No relevant/useable outcome data 19. Ochauleur et al., 2010 ¹⁰ No relevant/useable outcome data 19. Ochauleur et al., 2010 ¹⁰ No relevant/useable outcome data 10. Chauleur et al., 2010 ¹⁰ No relevant/useable outcome data 10. Chauleur et al., 2010 ¹⁰ No relevant/useable outcome data 11. Cavazza et al., 2010 ¹⁰ No relevant/useable outcome data 12. Cooley et al., 2013 ²⁰ No relevant/useable outcome data 23. Creagh et al., 2014 ²² No relevant/useable outcome data 24. Crowley et al., 2013 ²² No relevant/useable outcome data 25. Creagh et al., 2013 ²² No relevant/useable outcome data 26. Crowley et al., 2013 ²² No relevant/useable outcome data 27. Crowley et al., 2013 ²² No relevant/useable outcome data 28. Crowley et al., 2013 ²² No relevant/useable outcome data 29. Crowley et al., 2013 ²² No relevant/useable out		Authors, year	Reason for exclusion		
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			in pregnancy or the puerperium		

28.	Cutts et al., 2014 ²⁸	Not a RAM for predicting the risk of developing VTE	
28.	Cutts et al., 2014 -		
20	G # 1 2011 29	in pregnancy or the puerperium	
29.	Cutts et al., 2011 ²⁹	Not a RAM for predicting the risk of developing VTE	
20	2015 30	in pregnancy or the puerperium	
30.	Dargaud et al., 2015 30	Abstract of included full text study (Dargaud 2017)	
31.	Dargaud et al., 2009 31	Data overlap - patients included in Dargaud 2017	
	22	(included study)	
32.	Dargaud et al., 2009 32	No relevant/useable outcome data	
33.	Davis and Hadpawat-Lee 2017 ³³	No relevant/useable outcome data	
34.	Dentali et al., 2020 34	Not a RAM for predicting the risk of developing VTE	
		in pregnancy or the puerperium	
35.	Francis Kim et al., 2020 35	No relevant/useable outcome data	
36.	Francis Kim et al., 2020 36	No relevant/useable outcome data	
37.	Fuller et al., 2018 ³⁷	Not a RAM for predicting the risk of developing VTE	
		in pregnancy or the puerperium	
38.	Gassmann et al., 2020 38	Abstract of included full text study (Gassmann 2020)	
39.	Gerhardt et al., 2016 39	Not a RAM for predicting the risk of developing VTE	
		in pregnancy or the puerperium	
40.	Gherghe et al., 2012 40	No relevant/useable outcome data	
41.	Goffman et al., 2009 41	No relevant/useable outcome data	
42.	Gomez et al., 2020 42	No relevant/useable outcome data	
43.	Grille et al., 2015 43	No relevant/useable outcome data	
44.	Goodfellow et al., 2017 44	No relevant/useable outcome data	
45.	Grant et al., 2016 45	No relevant/useable outcome data	
46.	Handa et al., 2015 46	No relevant/useable outcome data	
47.	Harris et al., 2016 47	No relevant/useable outcome data	
48.	Hayes-Ryan and Byrne 2011 48	No relevant/useable outcome data	
49.	Hayes-Ryan and Byrne 2012 49	No relevant/useable outcome data	
50.	Heath and Goodfellow 2016 50	No relevant/useable outcome data	
51.	Henke and Pannucci 2010 51	Review	
52.	Kazi et al., 2020 52	Not a RAM for predicting the risk of developing VTE	
		in pregnancy or the puerperium	
53.	Lacoss and Jheeta 2017 53	Not a RAM for predicting the risk of developing VTE	
		in pregnancy or the puerperium	
54.	Li et al., 2018 ⁵⁴	Not a RAM for predicting the risk of developing VTE	
		in pregnancy or the puerperium	
55.	Lindqvist 2018 55	Letter	
56.	Lindqvist and Hellgren 2011 ⁵⁶	No relevant/useable outcome data	
57.	Lindqvist et al., 2002 57	No relevant/useable outcome data	

58.	Lou Mercade et al., 2017 58	No relevant/useable outcome data		
59.	Marks and Maiti 2018 ⁵⁹	No relevant/useable outcome data		
60.	Mcarthur et al., 2011 ⁶⁰	No relevant/useable outcome data		
61.	Mpouzouki et al., 2013 61	No relevant useable outcome data		
62.	Naidoo et al., 2019 62	No relevant/useable outcome data		
63.	Nct 2018 ⁶³	Protocol		
64.	Noone et al., 2013 ⁶⁴	No relevant/useable outcome data		
65.	O'Connor et al., 2011 65	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
66.	O'Keefe et al., 2019 66	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
67.	Omunakwe et al., 2017 ⁶⁷	No relevant/useable outcome data		
68.	Orfanelli et al., 2017 ⁶⁸	No relevant/useable outcome data		
69.	O'Shaughnessy et al., 2017 69	No relevant/useable outcome data		
70.	O'Shaughnessy et al., 2018 70	No relevant/useable outcome data		
71.	O'Shaughnessy et al., 2019 71	No relevant/useable outcome data		
72.	O'Sullivan et al., 2020 72	No relevant/useable outcome data		
73.	O'Sullivan et al., 2009 ⁷³	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
74.	Ottawa Hospital Research Institute	Protocol		
	and Leo Pharma 2002 74			
75.	Palmerola et al., 2016 75	No relevant/useable outcome data		
76.	Pannucci and Fleming 2017 76	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
77.	Pierce-Williams et al., 2018 77	No relevant/useable outcome data		
78.	Potdar et al., 2006 78	No relevant/useable outcome data		
79.	Rahim et al., 2020 79	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
80.	Righini et al., 2013 80	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
81.	Righini and Le Gal 2013 81	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
82.	Ryan 2019 82	No relevant/useable outcome data		
83.	Saad et al., 2018 83	Abstract of included full text study (Tran 2019)		
84.	Santos et al., 2015 84	No relevant/useable outcome data		
85.	Schoenbeck et al., 2011 85	No relevant/useable outcome data		
86.	Sellappan et al., 2012 86	Not a RAM for predicting the risk of developing VTE		
		in pregnancy or the puerperium		
87.	Shacaluga et al., 2017 87	No relevant/useable outcome data		

88.	Tan and Wisdom 2006 88	No relevant/useable outcome data
89.	Tang and Marsden 2011 89	No relevant/useable outcome data
90.	Taylor et al., 2000 90	No relevant/useable outcome data
91.	Testa et al., 2010 91	No relevant/useable outcome data
92.	Testa et al., 2013 92	No relevant/useable outcome data
93.	Touhami et al., 2018 93	Not a RAM for predicting the risk of developing VTE in pregnancy or the puerperium
94.	Usoro et al., 2019 94	Not a RAM for predicting the risk of developing VTE in pregnancy or the puerperium
95.	Valdre et al., 2016 95	No relevant/useable outcome data
96.	Von Hawrylak 2018 96	No relevant/useable outcome data
97.	Zhang et al., 2020 97	No relevant/useable outcome data

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Supplemental material

Characteristics	Name of VTE risk assessment model				
	RCOG	ACOG	SFOG	Lyon score	
General					
Author, year	Royal College of Obstetricians	James et al., 2018 ²	Lindquist et al., 2008 ³ and	Dargaud et al., 2017 ⁵	
	and Gynaecologists, 2015 ¹		Lindqvist & Hellgren, 2011 ⁴		
Applicable cohort	All pregnant and postpartum	All pregnant and postpartum	Pregnant women with moderate-	Pregnant women with high risk	
	women	women at risk	high risk of VTE	of thrombosis	
Design	Risk factor based with	Risk factor based	Risk factor based with	Risk factor based with	
	cumulative score		cumulative score	cumulative score	
Number of VTE risk variables	26	Not specified	23	15	
When is pharmacological	• Score ≥ 4 antenatally (from first	All women with acute VTE	Very high risk (high dose	• Score ≥ 6 antenatally or	
thromboprophylaxis recommended?	trimester)	during pregnancy, or women	antepartum and at least 12	postnatally	
	• Score 3 antenatally (from 28	with history of thrombosis or	weeks postpartum) ^a	• Score between 3 and 5, from	
	weeks)	those at significant risk of VTE	• Score ≥ 4 (antepartum and 6	third trimester	
	• Score ≥ 2 postnatally (at least	during pregnancy or the	weeks postpartum)		
	10 days).	postpartum period such as those	• Score 3 (after delivery [6		
	Antenatal hospital admission	with thrombophilia	weeks])		
	Prolonged hospital admission		• Score 2 (after delivery [7 days]		
	(≥ 3 days) or readmission to		or during immobilisation)		
	hospital within puerperium				
Pre-existing risk factors					

Previous VTE (personal)	Yes (except a single event related	Yes	Yes	Yes (pregnancy related, CVT or
	to major surgery)			massive PE or VTE in
				childhood [<16 years];
				unprovoked or oestrogen
				related; transient risk factor
				induced)
Recurrent VTE	No	Yes	Yes	Yes (personal history; residual
				venous thrombi with clinical
				signs of PTS, recent <2 years)
Previous VTE provoked by specific	Yes (major surgery)	Yes (surgery, trauma or	No	No
event		immobility AND additional		
		major thrombotic risk factors) ^b		
Family history of VTE	Yes (unprovoked or estrogen	Yes (first degree with	Yes (first degree <60 years)	Yes (severe or recurrent)
	related)	thrombophilia)		
Thrombophilia e.g. Factor V	Yes (various forms	Yes (various forms)	Yes (various forms)	Yes (various forms)
Leiden and Factor II mutations;				
protein C, protein S and				
antithrombin deficiency;				
antiphospholipid syndrome (with or				
without VTE)				
Medical comorbidities	Yes (3 points for any individual	No	Yes (inflammatory bowel	No
	comorbidities)		disease)	
Age	Yes (>35 years)	No	Yes (>40 years)	Yes (>35 years)
Obesity	Yes (≥30kg/m²; ≥40kg/m²)	No	Yes (>28kg/m ² in early	Yes (≥30kg/m²)
			pregnancy)	

Parity	Yes (≥3)	No	No	No	
Smoker	Yes	No	No	No	
Varicose veins	Yes (gross)	No	No	No	
Hyperhomocysteinemia	No	No	Yes (homocysteine >8 μmol/L	No	
			in pregnancy		
Mechanical heart prosthesis	No	No	Yes	No	
Chronic warfarin prophylaxis	No	No	Yes	No	
Obstetric					
Pre-eclampsia	Yes (current pregnancy)	No	Yes	No	
ART/IVF	Yes (antenatal only)	No	No	No	
Multiple pregnancy	Yes	No	No	Yes	
Caesarean section	Yes (elective/in labour)	No	Yes	No	
Mid-cavity or rotational operative	Yes	No	No	No	
delivery					
Prolonged labour (> 24 hours)	Yes	No	No	No	
Postpartum haemorrhage	Yes (>1 litre or transfusion)	No	No	No	
Preterm birth	Yes (<37 weeks, current	No	No	No	
	pregnancy)				
Stillbirth	Yes (current pregnancy)	No	No	No	
Abruptio placenta	No	No	Yes	No	
Transient factors					
Any surgical procedure	Yes (pregnancy or puerperium	No	No	No	
	except immediate repair of the				
	perineum)				
Hyperemesis	Yes	No	No	No	

Ovarian hyperstimulation syndrome	Yes (first trimester only)	No	No	No	
Systemic infection	Yes (current)	No	No	No	
Immobility	Yes (current and dehydration)	No	Yes	Yes	
Other					
'Other risk factors'	No	No	Yes (according to clinical	No	
			decision)		

^a Thromboprophylaxis initiated as early as possible (sometimes before pregnancy). Only women with antithrombin deficiency, chronic warfarin prophylaxis, recurrent VTE, antiphospholipid syndrome with VTE, and those with mechanical heart prosthesis are included in this group

ACOG, American College of Obstetricians and Gynaecologists; ART/IVF Assisted reproductive technology/ In vitro fertilization; RCOG, Royal College of Obstetricians and Gynaecologists; SFOG, Swedish Society of Obstetrics and Gynecology; VTE, venous thromboembolism

REFERENCES (APPENDIX S3)

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^b First-degree relative with a history of a thrombotic episode, or other major thrombotic risk factors (e.g., obesity, prolonged immobility, caesarean delivery