



**Queensland  
Government**

**Emergency Department Suspected  
Pulmonary Embolism (PE) Diagnostic  
Pathway for Non-pregnant Adults**

Facility: .....

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

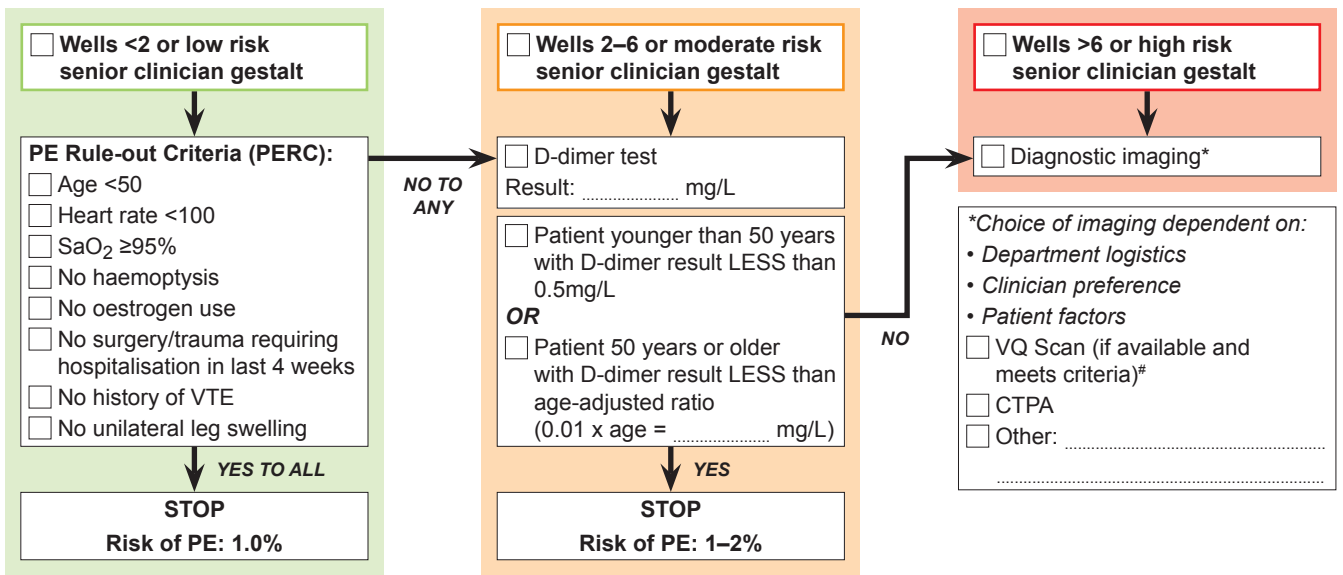
Date of birth:

Sex:  M  F  I

Clinical pathways never replace clinical judgement  
 Please discuss your patient with a senior clinician  
 Care outlined in this pathway must be altered if not clinically appropriate for the individual patient

**Date:** DD / MM / YY **Time:** HH : MM

Wells Risk Assessment Score	Yes	No
PE more likely than an alternative diagnosis	<input type="checkbox"/> (3)	<input type="checkbox"/> (0)
Suspected DVT	<input type="checkbox"/> (3)	<input type="checkbox"/> (0)
Heart rate >100/min	<input type="checkbox"/> (1.5)	<input type="checkbox"/> (0)
Immobilisation or surgery within previous 4 weeks	<input type="checkbox"/> (1.5)	<input type="checkbox"/> (0)
Previous DVT/PE	<input type="checkbox"/> (1.5)	<input type="checkbox"/> (0)
Haemoptysis	<input type="checkbox"/> (1)	<input type="checkbox"/> (0)
Malignancy (on treatment, treated in past 6 months or palliative)	<input type="checkbox"/> (1)	<input type="checkbox"/> (0)
<b>Total risk score for PE</b>		<b>/ 12.5</b>



**Reason(s) for variance from PE diagnostic pathway:**

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**Senior clinician name:**

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**#VQ scan if YES TO ALL:**

• Female    • <55 years    • Normal CXR    • Haemodynamically stable    • No significant suspicion of pathology other than PE

**REFERENCES**

- Buntine, P., Thien, F., Stewart, J., Woo, Y. P., Koolstra, M., Bridgford, L., Datta, M. and Gwini, S. M. (2019). Effect of a clinical flowchart incorporating Wells score, PERC rule and age-adjusted D-dimer on pulmonary embolism diagnosis, scan rates and diagnostic yield. *Emergency Medicine Australasia*, 31: 216-224. doi:10.1111/1742-6723.13125
- Penalzoza A et al. Comparison of the unstructured clinician gestalt, the Wells Score, and the revised Geneva score to estimate pretest probability for suspected pulmonary embolism. *Ann Emerg Med* 2013 Feb 20; [e-pub ahead of print]. (<http://dx.doi.org/10.1016/j.annemergmed.2012.11.002>)
- Kline JA, Courtney DM, Kabrehi C, et al. Prospective multicenter evaluation of the pulmonary embolism rule-out criteria. *J Thromb Haemost*. 2008;6(5):772-780. doi:10.1111/j.1538-7836.2008.02944.x
- Van Es N, Van Der Hulle T, Van Es J, et al. *Annals of Internal Medicine* Review Wells Rule and D-Dimer Testing to Rule Out Pulmonary Embolism A Systematic Review and Individual-Patient Data Meta-analysis. 2016. doi:10.7326/M
- RANZCR, Choosing Wisely Australia RANZCR Choosing Wisely Australia Recommendations 2015 <http://www.choosingwisely.org.au/getmedia/59b0d1ff-afd8-4abe-8f9e-199431680f74/RANZCR-Clinical-Decision-Rules.pdf.aspx>

DO NOT WRITE IN THIS BINDING MARGIN

ED SUSPECTED PE DIAGNOSTIC PATHWAY FOR NON-PREGNANT ADULTS

v1.01 - 02/2025



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