ANTICOAGULATION USE SAFETY

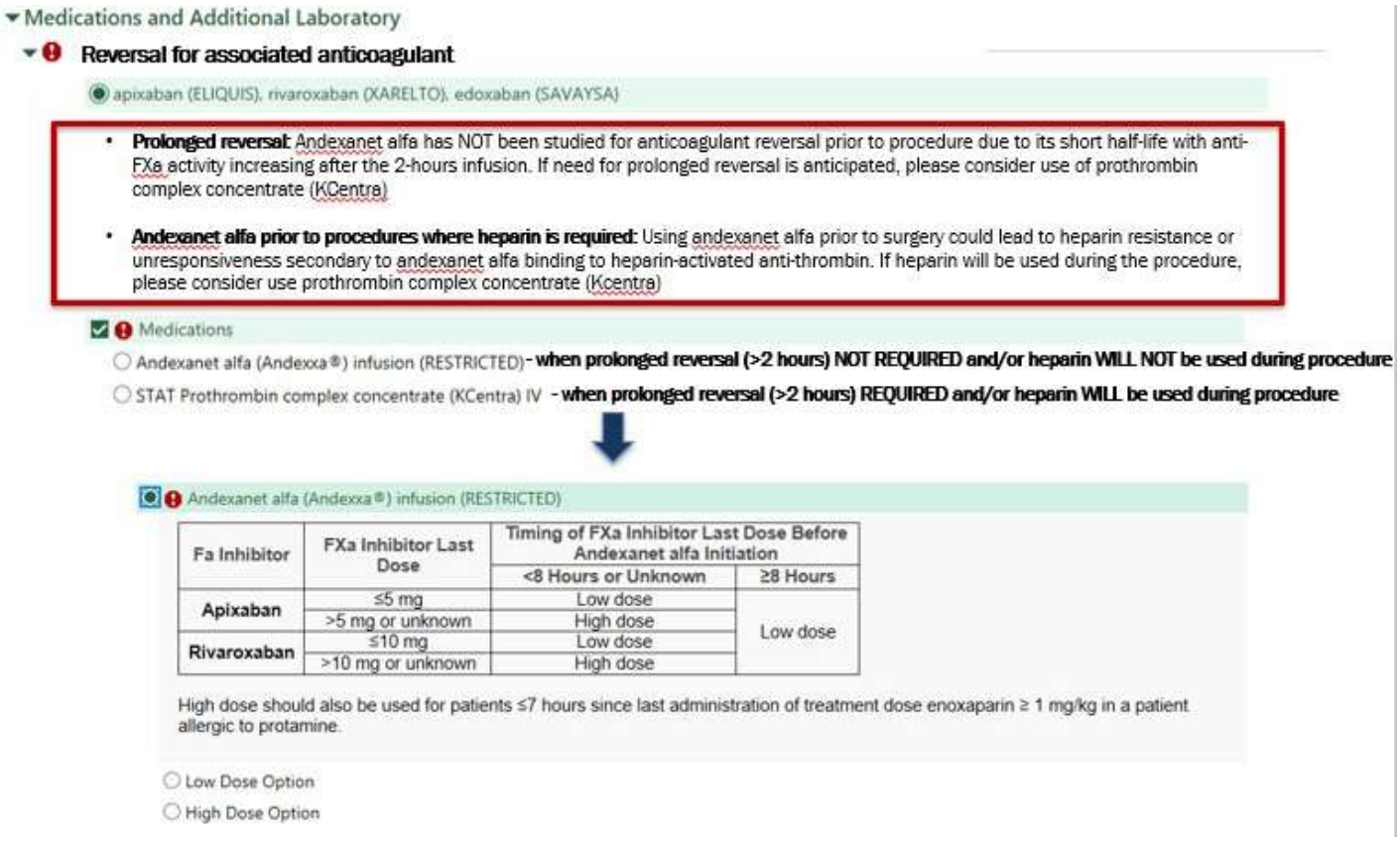
Patti Romeril, PharmD

Anticoagulant Reversal for Emergent Surgery/Procedure Order Set

Current Houston Methodist practice for anticoagulant reversal agent ordering leaves room for variability with the options to select several standalone orders or multiple order sets. In order to streamline this process and minimize errors, the proposal to create a "reversal of anticoagulation proor to emergent procedure/surgery" order set" has been approved. A summary of the accepted changes are listed below along with visual aids to demonstrate the process of ordering within Epic.

Summary of Accepted Changes:

Reversal of apixaban, rivaroxaban, edoxaban: add "prolonged reversal" and "andexanet alfa prior to procedures when heparin is required" statement



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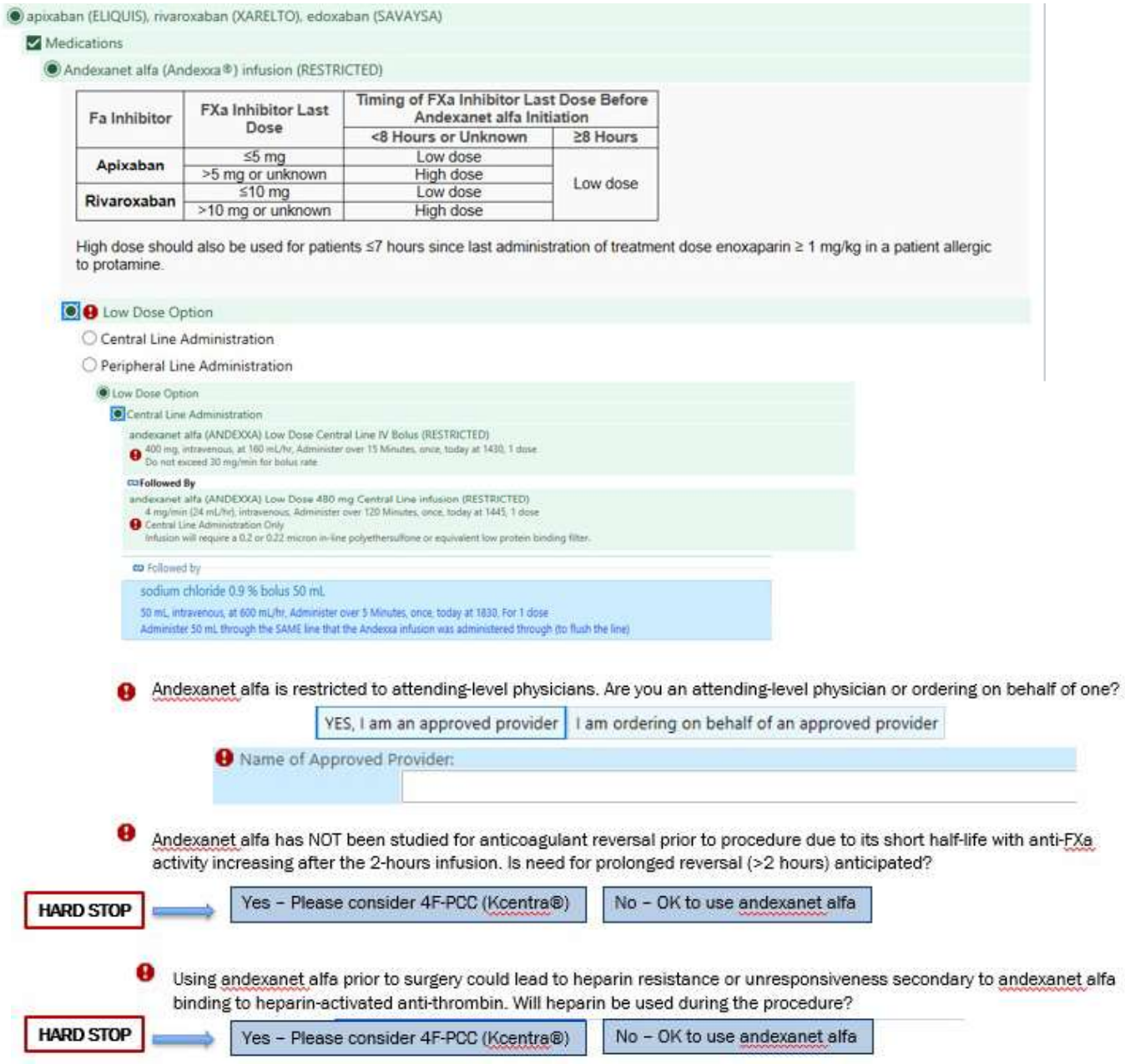
Summary of Accepted Changes (cont.):

Reversal of apixaban, rivaroxaban, edoxaban: Andexanet alfa selection– add sodium chloride 0.9 bolus following administration; add specific order questions



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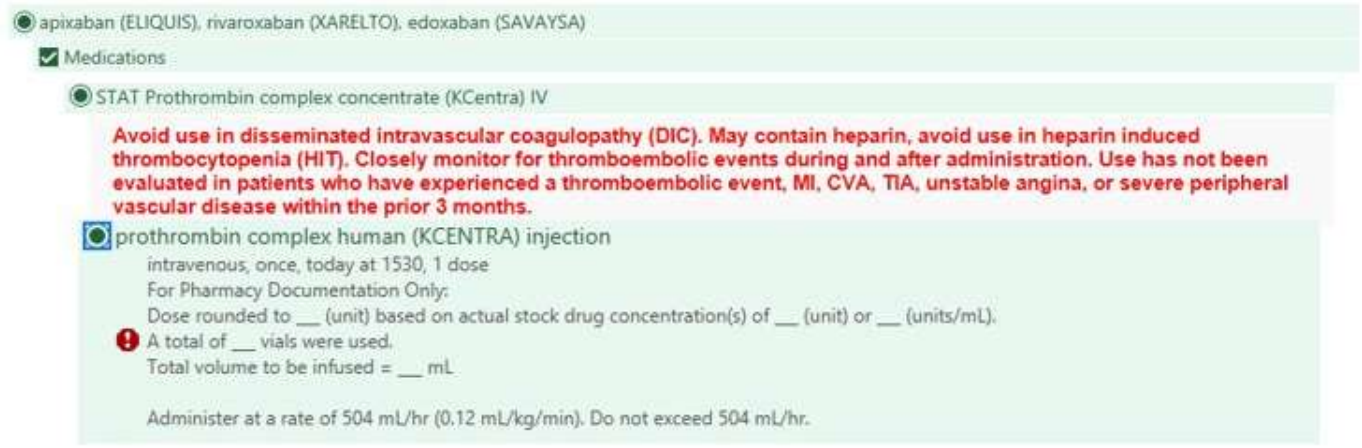
Summary of Accepted Changes (cont.):

Reversal of apixaban, rivaroxaban. Edoxaban: Change Prothrombin complex concentrate dosing to 1,000 units and 2,000 units (default dose)



Recommended dosing:

- Radio buttons for 1,000 units and 2,000 units – default selection 2,000 units

Removal of idarucizumab for dabigatran reversal standalone orders

- Remove dabigatran as a standalone order

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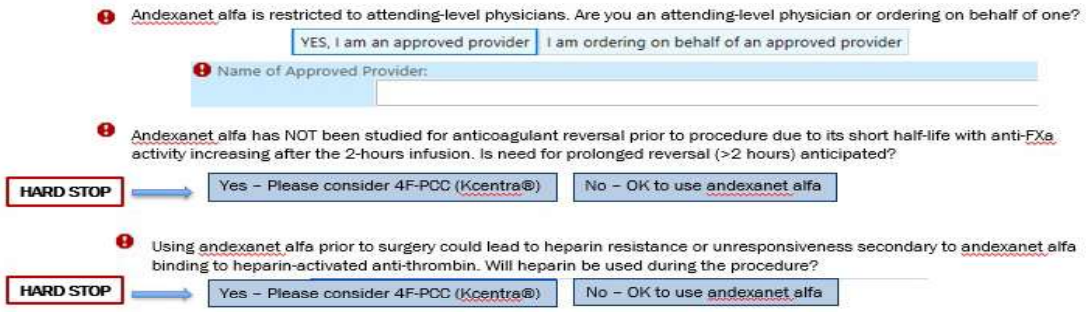
Summary of Accepted Changes (cont.):

Removal of protamine for heparin reversal standalone orders

- Remove protamine as a standalone order

Reversal of enoxaparin or dalteparin: refer to andexanet alfa changes– same order questions and hard stops for prolonged reversal and heparin during procedure



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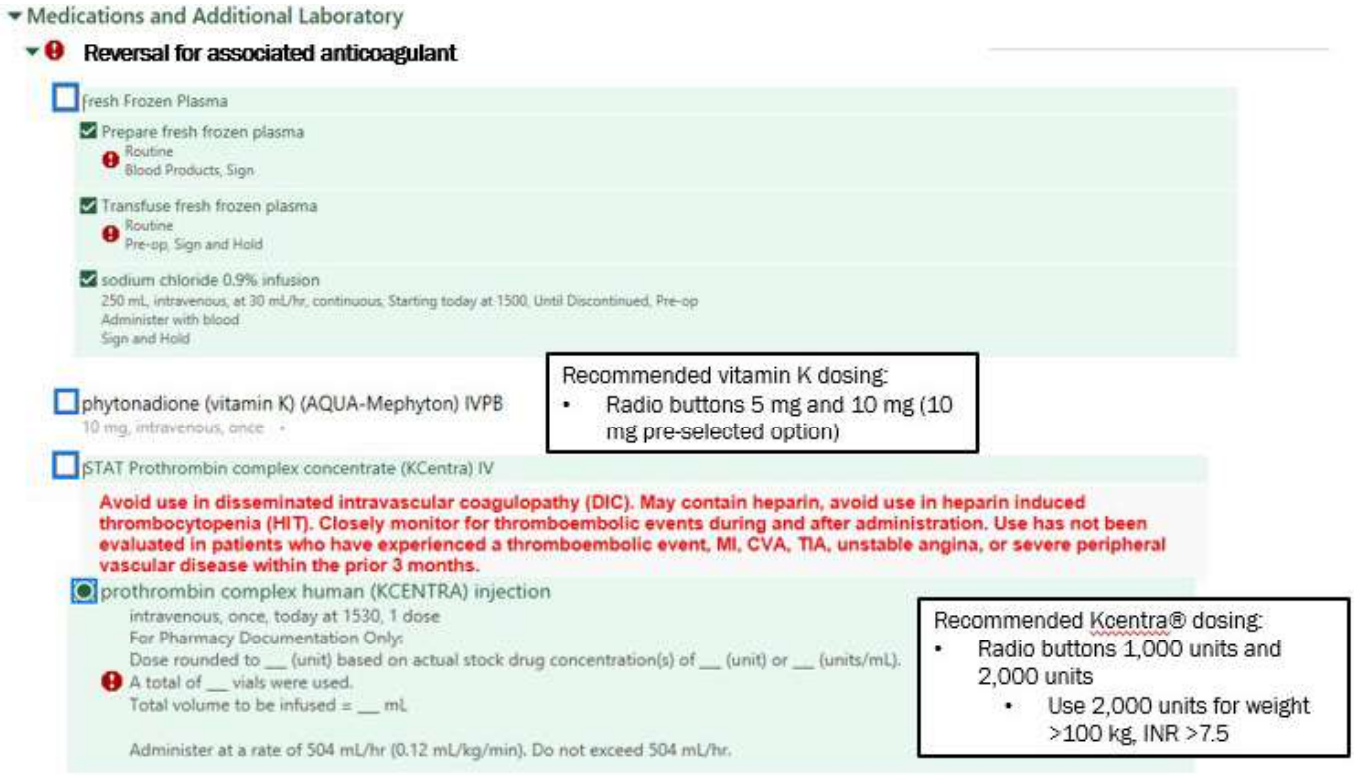
Summary of Accepted Changes (cont.):

Reversal of warfarin: change phytonadione IV dosing to 5mg and 10mg (default dose); Change prothrombin complex human default dosing to 1.000 units and 2,000 units. Use 2,000 units for weight > 100kg, INR > 7.5



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