

Rivaroxaban (Xarelto®) Formulary Approved Dosing

Nonvalvular atrial fibrillation to prevent stroke and systemic embolism

- For patients with CrCl >50 mL/min: 20 mg orally, once daily with the evening meal
- For patients with CrCl 15 - 50 mL/min: 15 mg orally, once daily with the evening meal
- Avoid use in patients with CrCl <15 mL/min

Renal Adjustments:

Nonvalvular atrial fibrillation:

- CrCl >50 mL/minute: No dosage adjustment necessary.
- CrCl 15-50 mL/minute: 15 mg once daily.
- CrCl <15 mL/minute: Avoid use
- ESRD requiring hemodialysis: Avoid use

Postoperative thromboprophylaxis

- Knee replacement: 10 mg once daily; recommended total duration of therapy: 12-14 days
- Hip replacement: 10 mg once daily; total duration of therapy: 35 days

Renal Adjustments:

Postoperative thromboprophylaxis:

- CrCl >50 mL/minute: No dosage adjustment necessary.
- CrCl 30-50ml/min: No dosage adjustment necessary, use with caution.
- ESRD requiring hemodialysis: Avoid Use
- CrCl < 30 : Avoid Use

DVT/PE treatment and prevention

- Dose: 15 mg twice daily for 3 weeks, followed by 20 mg once daily with food.
- CrCl \geq 30 mL/minute: No dosage adjustment necessary.
- CrCl <30 mL/minute: Avoid use

Dosage adjustment for concomitant therapy

- Coadministration with drugs that are combined P-glycoprotein (P-gp) and strong CYP3A4 **inducers** (eg, carbamazepine, phenytoin, rifampin, St John's wort): Concurrent use should be avoided. No specific dosing guidelines are currently available
- Avoid concomitant use with combined P-gp and strong CYP3A4 **inhibitors** (e.g., ketoconazole, itraconazole, lopinavir/ritonavir, ritonavir, indinavir/ritonavir, and conivaptan)