

Welcome to Anticoagulation

Carlin Rooke, MD

June 26, 2019

Part 1 -

How to refer to Coumadin Clinic:

(use the Message Pool!)

ZZZTEST, KLE...
ZZZTEST, KLEAN
Attending:

Communicate
Message
Reminder
Patient Letter
Provider Letter

DOB:10/11/1981
Hold Status:N/A
Care Team:: <No Primary Conta

Allergies: ciprofloxacin, Haldol

Menu

Provider View

- Overview
- Patient Summaries
- Results Review
- Orders + Add
- Documentation + Add
- Allergies + Add
- Body System View
- Chart Search
- Clinical Research
- Diagnosis & Problems

Provider View

Inpt Summary General Medicine Admit|Clinic Disch

Vital Signs +
Last 5 days for all visits
No results found

Intake and Output

Labs

Microbiology (0)

Patient Background

Documents
Last 1 month
No results fou

Diagnostic
Last 1 month
No results fou

Task Edit

High Notify Message Journal Portal Options

Launch Orders

Patient: ZZZTEST, KLEAN Caller: ZZZTEST, KLEAN Caller #:

To: Include me

CC: Provider: Rooke, Carlin To consumer Disable further replies

Subject: Save to Chart As: Phone Message/Call

Address Book

Internal

Type a name or select from list:

OVM

Personnel Pool Distribution List

Right click to add/remove a name in the personal address book

- Name
- OVM - Clinic A - Clerical
- OVM - Clinic A - Nursing
- OVM - Infusion Center - Clerical
- OVM - Infusion Center - Nursing

Show names from

Global Address Book

Send to

Name

Address Book

Internal

Type a name or select from list:

Personnel Pool Distribution List

Right click to add/remove a name in the personal address book

Name

- OVM - Clinic A - Clerical
- OVM - Clinic A - Nursing
- OVM - Infusion Center - Clerical
- OVM - Infusion Center - Nursing
- OVM - Occupational Therapy
- OVM - Physical Therapy
- OVM - PT/OT/Speech Therapy - Clerical
- OVM - Renal Pool
- OVM - Rheumatology - Clinic E - Clerical
- OVM - Rheumatology - Clinic E - Nursing
- OVM - Speech Therapy
- OVM Coumadin ED/UC Urgent Follow Up**
- OVM ED TFO Coordinator
- OVM GYN Aftercare ED/UC Urgent Follow Up

New Message

Task Edit

High Notify Message Journal Portal Options Launch Orders

Patient: ZZZTEST, KLEAN Caller: ZZZTEST, KLEAN Caller #:

To: OVM Coumadin ED/UC Urgent Follow Up Include me

CC: Provider: Rooke, Carlin To consumer Disable further replies

Subject: WE LOVE COUMADIN CLINIC! Save to Chart As: Phone Message/Call

Attachments

Transition of Care

Message

Arial 24

Tell me something interesting about your patient....

Actions

- Patient Needs Appointment
- Needs Lab Before Refill
- Please Call Patient with Results
- Message Left for Patient to Return Call
- Agree with Message
- See Note In Chart

Remind on:

Due on:

INPATIENT DISCHARGE: Please check insurance status (or ask for help during UM rounds)

Menu

- ED Summary
- Vitals/Nursing/Results
- Place Orders
- Review Orders + Add
- Provider Notes + Add
- Notes
- MAR Summary
- RFV and PMH
- Family, Social, Surgical Hx
- Home Meds + Add
- Allergies + Add
- iView and I&O
- Flowsheet
- Growth Chart
- Immunization Schedule
- Demographics**
- Form Browser
- Clinical Research
- Patient Goals
- Health Maintenance
- Form Browser
- Chart Search
- ELM Record
- Community (HIE) Records
- iMedConsent
- eConsult

Demographics

Demographics Visit List PPR Summary

Visit Type	Location	Admit Date
Outpatient	OVM Cardio Lab	06/25/2019 12:40:30 PDT
Outpatient	OVM Lab	06/25/2019 12:24:00 PDT
Outpatient	OVM Anticoag	06/25/2019 12:08:39 PDT
Outpatient	OVM Clinic B WAITINGROOM	06/25/2019 09:26:41 PDT
Outpatient	OVM Lab	06/19/2019 21:39:00 PDT
Outpatient	OVM Anticoag	06/11/2019 08:41:46 PDT
Outpatient	OVM Anticoag	06/04/2019 09:12:46 PDT
Outpatient	OVM Clinic C Exam Room 4	06/04/2019 07:48:02 PDT
Outpatient	OVM Anticoag	05/28/2019 08:44:11 PDT
Outpatient	OVM Lab	05/23/2019 16:08:00 PDT
Outpatient	OVM Clinic A Exam Room 6	05/23/2019 12:56:32 PDT
Outpatient	OVM Anticoag	05/21/2019 08:42:02 PDT
Outpatient	OVM Lab	05/14/2019 08:54:00 PDT
Outpatient	OVM Anticoag	05/14/2019 08:31:00 PDT
Emergency	OVM ED 03 .	05/07/2019 11:47:00 PDT
Outpatient Surgery	OVM OPHA	05/07/2019 05:03:59 PDT
Outpatient	OVM Anticoag	04/30/2019 08:04:00 PDT

Visit Reason: IN PERSON

Accommodation :

Room :

Isolation Code :

Nurse Unit : OVM Anticoag

Bed :

Provider Relationships

Type	NAME
Admitting Phys...	(Rooke, Carlin)
Attending Phys...	Rooke, Carlin
Nurse Practitio...	Kopf, Paula
Supervisor	Quinto, Vincenzo M

Health Plan Information

Type	PLAN NAME	INSUF
Non-DHS Medi-Cal ...	MEDI-CAL MANA...	MEDI-
Self Pay 04	SELF PAY OUTPAT...	SELF I

INPATIENT DISCHARGE: Please check insurance status (or ask for help during UM rounds)

NO



Health Plan Information		
Type	PLAN NAME	INSUR
Non-DHS Medi-Cal ...	MEDI-CAL MANA...	MEDI-
Self Pay 04	SELF PAY OUTPAT...	SELF P

YES



Type	PLAN NAME	INSUR NAME
Medi-Cal 02	MEDI-CAL RESTRI...	MEDI-CAL RE
Self Pay 04	SELF PAY OUTPAT...	SELF PAY OU

YES



Type	PLAN NAME	INSUR
DHS Medi-Cal Manag...	MEDI-CAL MANA...	MEDI-
Self Pay 04	SELF PAY OUTPAT...	SELF P

TIME TO APPOINTMENT:

Minimum time from when you send the referral to when the patient can be seen:

3-5 days

(depending on the day of the week)

IF YOU SEND REFERRAL ON....	EARLIEST PATIENT CAN BE SEEN...
MONDAY	FRIDAY
TUESDAY	FRIDAY
WEDNESDAY	MONDAY
THURSDAY	MONDAY
FRIDAY	WEDNESDAY

MORAL OF THE STORY:

If you really need patient to be seen
sooner than 3-5 days (after referral), then
PAGE ME OR CALL ANTICOAG CLINIC

ANTICOAGULATION CLINIC INFO:

PHONE (**PROVIDERS ONLY**)

x73711

PHONE (FOR PATIENTS)

x74418

LOCATION: 2D-152

CLINIC HOURS:

MONDAY 8:00-12:00

TUESDAY 8:00-12:00

WEDNESDAY 8:00-3:00

THURSDAY CLOSED

FRIDAY 8:00-12:00

Part 2 -
IV HEPARIN INFUSION

QUESTIONS?




PHARMACY (x73596)

ME (AMION)

Search orders for “heparin”

The screenshot displays a medical software interface. On the left is a dark sidebar menu with the following items: Provider View, Overview, Patient Summaries, Results Review, **Orders** (highlighted in blue with a '+ Add' button), Documentation (+ Add), Allergies (+ Add), Body System View, Chart Search, and Clinical Research. The main content area has a top navigation bar with '+ Add', 'Document Medication by Hx', 'Reconciliation', and 'Check Intera'. Below this are tabs for 'Orders', 'Medication List', and 'Document In Plan'. The 'Orders' tab is active, showing a search bar with 'heparin' and an 'Advanced Options' dropdown. Below the search bar is a navigation bar with 'Up', 'Home', 'Favorites', 'Folders', 'Copy', and 'Fo'. The search results list includes: 'Heparin Drip (Angio Use Only) 1000 units in D5W 500 mL Premix', 'Heparin Drip (Angio Use Only) 1000 units in NS 500 mL Premix', 'Heparin Drip ACS/Cardiac per Pharmacy', 'Heparin Drip DVT/PE per Pharmacy', 'Heparin Drip Low Dose per Pharmacy', 'heparin flush', and 'heparin flush'. A red rectangular box highlights the three items: 'Heparin Drip ACS/Cardiac per Pharmacy', 'Heparin Drip DVT/PE per Pharmacy', and 'Heparin Drip Low Dose per Pharmacy'.

Select desired order set:

-  Heparin Drip ACS/Cardiac per Pharmacy
-  Heparin Drip DVT/PE per Pharmacy
-  Heparin Drip Low Dose per Pharmacy
















Approved clinical indications:

- (1) Unstable angina/NSTEMI
- (2) Bridging for AFib/flutter
- (3) Cardiac valve replacement
- (4) STEMI with TPA
- (5) Intraaortic balloon pump
- (6) Perioperative bridging

- (1) Acute DVT or PE
- (2) Arterial thrombosis (peripheral emboli)

This protocol targets a prophylactic (subtherapeutic) level of anticoagulation. It is intended for high bleeding-risk surgical patients in whom there is concern for vascular thrombosis
**This will mostly be used at Har + LAC

Initial appearance of the Heparin Drip ACS/Cardiac order set (note pre-checked orders)

	\$		Component	Status
Heparin Drip ACS/Cardiac per Pharmacy (Planned Pending)				
▾ Patient Care				
			Heparin Indication - ACS - Provider will order heparin bolus (60 unit/kg, not to exceed 4,000 units) - Pharmacist will titrate heparin infusion according to the DHS A - Exclusion criteria: active major bleeding, platelets < 50,000 mm ³	
<input checked="" type="checkbox"/>			Dosing Weight Change	
▾ Medications				
<input checked="" type="checkbox"/>			Heparin Pharmacy to Dose	
<input type="checkbox"/>			heparin (Heparin Sodium Bolus)	
<input type="checkbox"/>			Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	
▾ Laboratory				
			Provider will order baseline labs, including Anti-Xa, if not done i	
<input checked="" type="checkbox"/>			CBC w/ Diff	
<input checked="" type="checkbox"/>			CBC w/ Diff	
<input checked="" type="checkbox"/>			Prothrombin Time with INR (PT w/ INR)	
<input checked="" type="checkbox"/>			APTT (Partial Thromboplastin Time)	
<input checked="" type="checkbox"/>			Anti XA, UFH	
			Pharmacist to complete lab order below:	
<input type="checkbox"/>			Anti XA, UFH	

Initial appearance of the Heparin Drip ACS/Cardiac order set (note pre-checked orders)

	Component	Status
Heparin Drip ACS/Cardiac per Pharmacy (Planned Pending)		
Patient Care		
	Heparin Indication - ACS - Provider will order heparin bolus (60 unit/kg, not to exceed 5000 units) - Pharmacist will titrate heparin infusion according to the Drip Rate Exclusion criteria: active major bleeding, platelets < 50,000	
<input checked="" type="checkbox"/>	Dosing Weight Change	
Medications		
<input checked="" type="checkbox"/>	Heparin Pharmacy to Dose	
<input type="checkbox"/>	heparin (Heparin Sodium Bolus)	
<input type="checkbox"/>	Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	
Laboratory		
	Provider will order baseline labs, including Anti-Xa, if not done in last 72 hours	
<input checked="" type="checkbox"/>	CBC w/ Diff	
<input checked="" type="checkbox"/>	CBC w/ Diff	
<input checked="" type="checkbox"/>	Prothrombin Time with INR (PT w/ INR)	
<input checked="" type="checkbox"/>	APTT (Partial Thromboplastin Time)	
<input checked="" type="checkbox"/>	Anti XA, UFH	
	Pharmacist to complete lab order below:	
<input type="checkbox"/>	Anti XA, UFH	

Instructs nurse to weigh patient and update dosing weight

Initial appearance of the Heparin Drip ACS/Cardiac order set (note pre-checked orders)

	Component	Status
Heparin Drip ACS/Cardiac per Pharmacy (Planned Pending)		
Patient Care		
	Heparin Indication - ACS - Provider will order heparin bolus (60 unit/kg, not to exceed 4000 units) - Pharmacist will titrate heparin infusion according to the D - Exclusion criteria: active major bleeding, platelets < 50,000	
<input checked="" type="checkbox"/>	Dosing Weight Change	
Medications		
<input checked="" type="checkbox"/>	Heparin Pharmacy to Dose	
<input type="checkbox"/>	heparin (Heparin Sodium Bolus)	
<input type="checkbox"/>	Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	
Laboratory		
	Provider will order baseline labs, including Anti-Xa, if not done	
<input checked="" type="checkbox"/>	CBC w/ Diff	
<input checked="" type="checkbox"/>	CBC w/ Diff	
<input checked="" type="checkbox"/>	Prothrombin Time with INR (PT w/ INR)	
<input checked="" type="checkbox"/>	APTT (Partial Thromboplastin Time)	
<input checked="" type="checkbox"/>	Anti XA, UFH	
	Pharmacist to complete lab order below:	
<input type="checkbox"/>	Anti XA, UFH	

















Notifies pharmacist to take responsibility of heparin monitoring and adjustment

Initial appearance of the Heparin Drip ACS/Cardiac order set (note pre-checked orders)

	Component	Status
Heparin Drip ACS/Cardiac per Pharmacy (Planned Pending)		
Patient Care		
	Heparin Indication - ACS - Provider will order heparin bolus (60 unit/kg, not to exceed 4000 units) - Pharmacist will titrate heparin infusion according to the D - Exclusion criteria: active major bleeding, platelets < 50,000	
<input checked="" type="checkbox"/>	Dosing Weight Change	
Medications		
<input checked="" type="checkbox"/>	Heparin Pharmacy to Dose	
<input type="checkbox"/>	heparin (Heparin Sodium Bolus)	
<input type="checkbox"/>	Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	
Laboratory		
	Provider will order baseline labs, including Anti-Xa, if not done	
<input checked="" type="checkbox"/>	CBC w/ Diff	
<input checked="" type="checkbox"/>	CBC w/ Diff	
<input checked="" type="checkbox"/>	Prothrombin Time with INR (PT w/ INR)	
<input checked="" type="checkbox"/>	APTT (Partial Thromboplastin Time)	
<input checked="" type="checkbox"/>	Anti XA, UFH	
	Pharmacist to complete lab order below:	
<input type="checkbox"/>	Anti XA, UFH	

YOU have to check this box if you want a bolus (pharmacy will dose)

Initial appearance of the Heparin Drip ACS/Cardiac order set (note pre-checked orders)

			Component	Status
Heparin Drip ACS/Cardiac per Pharmacy (Planned Pending)				
Patient Care				
			Heparin Indication - ACS - Provider will order heparin bolus (60 unit/kg, not to exceed 4,000 units) - Pharmacist will titrate heparin infusion according to the DHS A - Exclusion criteria: active major bleeding, platelets < 50,000 mm ³	
<input checked="" type="checkbox"/>			Dosing Weight Change	
Medications				
<input checked="" type="checkbox"/>			Heparin Pharmacy to Dose	
<input type="checkbox"/>			heparin (Heparin Sodium Bolus)	
<input type="checkbox"/>			Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	
Laboratory				
			Provider will order baseline labs, including Anti-Xa, if not done	
<input checked="" type="checkbox"/>			CBC w/ Diff	
<input checked="" type="checkbox"/>			CBC w/ Diff	
<input checked="" type="checkbox"/>			Prothrombin Time with INR (PT w/ INR)	
<input checked="" type="checkbox"/>			APTT (Partial Thromboplastin Time)	
<input checked="" type="checkbox"/>			Anti XA, UFH	
			Pharmacist to complete lab order below:	
<input type="checkbox"/>			Anti XA, UFH	

YOU have to check this box if you want a heparin infusion (pharmacy will dose)

Select appropriate clinical indication.
Provide callback number or pager.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	heparin IV additive 25,000 units + Premix D5W (Heparin ACS) 500 mL	Pharmacy to dose at 60 unit/kg. DO NOT EXCEED 4,000 u 500 mL, IV Continuous Pharmacy to determine initial Initial infusion rate 12 unit/kg/hr (not to exceed 1,00
Laboratory			
Provider will order baseline labs, including Anti-Xa, if not done in past 24 hrs. Pharmacist will order subsequent Anti-Xa levels according to prot			
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CBC w/ Diff	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CBC w/ Diff	Blood, AM Draw collect, T+1;0400, Lab Collect
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Prothrombin Time with INR (PT w/ INR)	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	APTT (Partial Thromboplastin Time)	Blood, Stat collect, T;N, Nurse collect

Details for heparin IV additive 25,000 units + Premix D5W (Heparin ACS) 500 mL

Details Continuous Details Offset Details Diagnoses

***Heparin Drip Indication (ACS):**

Route of Administration:

Pharmacy Reference:

Approving Provider/Consultant:

***Provider Call Back Number/Pager:**

Requested Start Date/Time:

Restricted Criteria Met?: Yes No

Initial appearance of the Heparin Drip ACS/Cardiac order set (note pre-checked orders)

	\$		Component	Status
Heparin Drip ACS/Cardiac per Pharmacy (Planned Pending)				
Patient Care				
			Heparin Indication - ACS - Provider will order heparin bolus (60 unit/kg, not to exceed 4,000 units) - Pharmacist will titrate heparin infusion according to the DHS A - Exclusion criteria: active major bleeding, platelets < 50,000 mm ³	
<input checked="" type="checkbox"/>			Dosing Weight Change	
Medications				
<input checked="" type="checkbox"/>			Heparin Pharmacy to Dose	
<input type="checkbox"/>			heparin (Heparin Sodium Bolus)	
<input type="checkbox"/>			Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	
Laboratory				
			Provider will order baseline labs, including Anti Xa, if not done	
<input checked="" type="checkbox"/>			CBC w/ Diff	
<input checked="" type="checkbox"/>			CBC w/ Diff	
<input checked="" type="checkbox"/>			Prothrombin Time with INR (PT w/ INR)	
<input checked="" type="checkbox"/>			APTT (Partial Thromboplastin Time)	
<input checked="" type="checkbox"/>			Anti XA, UFH	
			Pharmacist to complete lab order below:	
<input type="checkbox"/>			Anti XA, UFH	

Baseline labs, pre-checked.

Comparison of the three heparin drip options

What do the three heparin drips have **in common**?

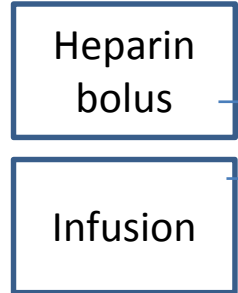
Dosing weight

Pharmacy to dose

Lab orders

Patient Care		
<p>Heparin Indication - ACS - Provider will order heparin bolus (60 unit/kg, not to exceed 4,000 units) and initial heparin infusion (12 unit/kg/hr, not to exceed 1,000 unit/hr) - Pharmacist will titrate heparin infusion according to the DHS ACS Algorithm (see "Continuous Details") - Exclusion criteria: active major bleeding, platelets < 50,000 mm³, heparin-induced thrombocytopenia, hypersensitivity to heparin or heparin derivatives</p>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Dosing Weight Change	T;N, Weigh patient STAT. Enter as measured weight and dosing weight.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Pharmacy to Dose	1 EA, N/A, Form: Misc, QDAY This is a pharmacy consult order only.
<input type="checkbox"/>	<input checked="" type="checkbox"/> heparin (Heparin Sodium Bolus)	Pharmacy to dose, IV Push, Form: Injection, ONCE Pharmacy to dose at 60 unit/kg. Do not exceed 4,000 units per dose. Round dose to the ...
<input type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	500 mL, IV Continuous Pharmacy to determine initial rate Initial infusion rate 12 unit/kg/hr (not to exceed 1,000 unit/hr). Goal Anti-Xa level 0.30-0.7...
Laboratory		
<p>Provider will order baseline labs, including Anti-Xa, if not done in past 24 hrs. Pharmacist will order subsequent Anti-Xa levels according to protocol.</p>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> CBC w/ Diff	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> CBC w/ Diff	Blood, AM Draw collect, T+1;0400, Lab Collect
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Prothrombin Time with INR (PT w/ I...	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> APTT (Partial Thromboplastin Time)	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Anti XA, UFH	Blood, Stat collect, T;N, Nurse collect
Pharmacist to complete lab order below:		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Anti XA, UFH	Blood, Stat collect, T;N+360, Nurse collect




What is **different** about the three heparin drips?



Patient Care		
	Heparin Indication - ACS	
	- Provider will order heparin bolus (60 unit/kg, not to exceed 4,000 units) and initial heparin infusion (12 unit/kg/hr, not to exceed 1,000 unit/hr)	
	- Pharmacist will titrate heparin infusion according to the DHS ACS Algorithm (see "Continuous Details")	
	- Exclusion criteria: active major bleeding, platelets < 50,000 mm ³ , heparin-induced thrombocytopenia, hypersensitivity to heparin or pork/beef products	
<input checked="" type="checkbox"/>	Dosing Weight Change	T;N, Weigh patient STAT. Enter as measured weight and dosing weight.
Medications		
<input checked="" type="checkbox"/>	Heparin Pharmacy to Dose	1 EA, N/A, Form: Misc, QDAY <i>This is a pharmacy consult order only.</i>
<input type="checkbox"/>	heparin (Heparin Sodium Bolus)	Pharmacy to dose, IV Push, Form: Injection, ONCE Pharmacy to dose at 60 unit/kg. Do not exceed 4,000 units per dose. Round dose to the ...
<input type="checkbox"/>	Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	500 mL, IV Continuous Pharmacy to determine initial rate Initial infusion rate 12 unit/kg/hr (not to exceed 1,000 unit/hr). Goal Anti-Xa level 0.30-0.7...
Laboratory		
	Provider will order baseline labs, including Anti-Xa, if not done in past 24 hrs. Pharmacist will order subsequent Anti-Xa levels according to protocol.	
<input checked="" type="checkbox"/>	CBC w/ Diff	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	CBC w/ Diff	Blood, AM Draw collect, T+1;0400, Lab Collect
<input checked="" type="checkbox"/>	Prothrombin Time with INR (PT w/ I...	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	APTT (Partial Thromboplastin Time)	Blood, Stat collect, T;N, Nurse collect
<input checked="" type="checkbox"/>	Anti XA, UFH	Blood, Stat collect, T;N, Nurse collect
	Pharmacist to complete lab order below:	
<input type="checkbox"/>	Anti XA, UFH	Blood, Stat collect, T;N+360, Nurse collect

Comparison of Bolus, Infusion, and Goal Anti-Xa/aPTT

	ACS/Cardiac	DVT/PE	Low Dose
Bolus	60 unit/kg (max 4,000 unit)	80 unit/kg (max 10,000 unit)	None
Initial infusion	12 unit/kg/hr (Max 1,000 unit/hr)	18 unit/kg/hr (max 2,000 unit/hr)	7 unit/kg/hr (max 1,000 unit/hr)
Goal Anti-Xa	0.3 – 0.7	0.3 – 0.7	0.1 – 0.3
Goal aPTT	75 – 100	75 – 100	50 – 74

Medications		
<input checked="" type="checkbox"/>	 Heparin Pharmacy to Dose	1 EA, N/A, Form: Misc, QDAY This is a pharmacy consult order only.
<input type="checkbox"/>	 heparin (Heparin Sodium Bolus)	Pharmacy to dose, IV Push, Form: Injection, ONCE Pharmacy to dose at 60 unit/kg. Do not exceed 4,000 units per dose. Round dose to the ...
<input type="checkbox"/>	 Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	500 mL, IV Continuous Pharmacy to determine initial rate Initial infusion rate 12 unit/kg/hr (not to exceed 1,000 unit/hr). Goal Anti-Xa level 0.30-0.7...

Comparison of Bolus

	ACS/Cardiac	DVT/PE	Low Dose
Bolus	60 unit/kg (max 4,000 unit)	80 unit/kg (max 10,000 unit)	None
Initial infusion	12 unit/kg/hr (Max 1,000 unit/hr)	18 unit/kg/hr (max 2,000 unit/hr)	7 unit/kg/hr (max 1,000 unit/hr)
Goal Anti-Xa	0.3 – 0.7	0.3 – 0.7	0.1 – 0.3
Goal aPTT	75 – 100	75 – 100	50 – 74

Medications		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Pharmacy to Dose	1 EA, N/A, Form: Misc, QDAY This is a pharmacy consult order only.
<input type="checkbox"/>	<input checked="" type="checkbox"/> heparin (Heparin Sodium Bolus)	Pharmacy to dose, IV Push, Form: Injection, ONCE Pharmacy to dose at 60 unit/kg. Do not exceed 4,000 units per dose. Round dose to the ...
<input type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	500 mL, IV Continuous Pharmacy to determine initial rate Initial infusion rate 12 unit/kg/hr (not to exceed 1,000 unit/hr). Goal Anti-Xa level 0.30-0.7...

Comparison of **Infusion**

	ACS/Cardiac	DVT/PE	Low Dose
Bolus	60 unit/kg (max 4,000 unit)	80 unit/kg (max 10,000 unit)	None
Initial infusion	12 unit/kg/hr (Max 1,000 unit/hr)	18 unit/kg/hr (max 2,000 unit/hr)	7 unit/kg/hr (max 1,000 unit/hr)
Goal Anti-Xa	0.3 – 0.7	0.3 – 0.7	0.1 – 0.3
Goal aPTT	75 – 100	75 – 100	50 – 74

Medications		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Pharmacy to Dose	1 EA, N/A, Form: Misc, QDAY This is a pharmacy consult order only.
<input type="checkbox"/>	<input checked="" type="checkbox"/> heparin (Heparin Sodium Bolus)	Pharmacy to dose, IV Push, Form: Injection, ONCE Pharmacy to dose at 60 unit/kg. Do not exceed 4,000 units per dose. Round dose to the ...
<input type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	500 mL, IV Continuous Pharmacy to determine initial rate Initial infusion rate 12 unit/kg/hr (not to exceed 1,000 unit/hr). Goal Anti-Xa level 0.30-0.7...

Comparison of Goal Anti-Xa/aPTT

	ACS/Cardiac	DVT/PE	Low Dose
Bolus	60 unit/kg (max 4,000 unit)	80 unit/kg (max 10,000 unit)	None
Initial infusion	12 unit/kg/hr (Max 1,000 unit/hr)	18 unit/kg/hr (max 2,000 unit/hr)	7 unit/kg/hr (max 1,000 unit/hr)
Goal Anti-Xa	0.3 – 0.7	0.3 – 0.7	0.1 – 0.3
Goal aPTT	75 – 100	75 – 100	50 – 74

Medications		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Pharmacy to Dose	1 EA, N/A, Form: Misc, QDAY This is a pharmacy consult order only.
<input type="checkbox"/>	<input checked="" type="checkbox"/> heparin (Heparin Sodium Bolus)	Pharmacy to dose, IV Push, Form: Injection, ONCE Pharmacy to dose at 60 unit/kg. Do not exceed 4,000 units per dose. Round dose to the ...
<input type="checkbox"/>	<input checked="" type="checkbox"/> Heparin Drip (ACS) 25000 units in D5W 500 mL Premix (Adult)	500 mL, IV Continuous Pharmacy to determine initial rate Initial infusion rate 12 unit/kg/hr (not to exceed 1,000 unit/hr). Goal Anti-Xa level 0.30-0.7..

FAQs

How do I interpret AntiXa UFH levels?

aPTT (sec)	Anti-Xa (IU)
Less than 57	Less than 0.2
58 – 74	0.20 – 0.29
75 – 100	0.30 – 0.70
101 – 115	0.71 – 0.80
116 – 131	0.81 – 1.10
132 – 179	1.11 – 1.70
> 179	> 1.70

Interrupting drip for procedures:

- **Discontinue** infusion order
- Keep “pharmacy to dose” active
- **Re-order** when you want to restart