

SESLHD PROCEDURE

Anticoagulation with Intravenous Heparin Sodium Infusion

SESLHDPR/402

APPENDIX B –Higher Bleeding Risk Protocol

(Where bleeding risk needs to be minimised) ⁵

IV HEPARIN HIGHER BLEEDING RISK PROTOCOL			HIGHER BLEEDING RISK PROTOCOL
Initial IV bolus dosage: <ul style="list-style-type: none"> Use Heparin Sodium 5,000 units in 5 mL ampoules/ concentration For patients weighing 60 kg and over administer a bolus dose of 4000 units For patients weighing less than 60 kg administer a weight based bolus of 60 units/kg (calculated below) There may be circumstances where the bolus dose is omitted, for example if the patient is receiving another anticoagulant agent and a delayed onset of anticoagulant effect is required 			
Bolus Dose for Patients weighing 60 kg and over			
Weight (kg)	Bolus (Units)		
60 kg and over	4000		
Weight Based Bolus Dose			
Weight (kg)	BOLUS (Units)		
40 kg	2400		
45 kg	2700		
50 kg	3000		
55 kg	3300		
IV HEPARIN HIGHER BLEEDING RISK PROTOCOL			HIGHER BLEEDING RISK PROTOCOL
Infusion Initiation Protocol: <ul style="list-style-type: none"> Use Premixed Solution of Heparin Sodium 25,000 units in 250mL Sodium Chloride 0.9% (100 units per mL) Initial infusion rate based on 12 units/kg/hr, rounded to nearest 1 mL per hour (calculated below) The initial infusion rate should not exceed 1,000 units/hr 			
Weight (kg)	Units per Hour	Infusion Pump Starting Rate (mL/hr) ↓	
40	480 Units	5	
45	540 Units	5	
50	600 Units	6	
55	660 Units	7	
60	720 Units	7	
65	780 Units	8	
70	840 Units	8	
75	900 Units	9	
80	960 Units	10	
84 and over	1000 units	10	

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IV HEPARIN INFUSION RATE ADJUSTMENT NOMOGRAM (adjust infusion rate according to the aPTT)

aPTT (seconds)	Bolus Dose	Stop Infusion	IV Rate Change (mL/hr)	Repeat aPTT
Less than 45	Nil	No	<ul style="list-style-type: none"> Increase rate by 1 mL/hr from current rate 	4-6 hours
45-70	<p style="text-align: center;">Therapeutic Range No change from current rate</p>		<ul style="list-style-type: none"> Repeat at 6 Hours After 2 consecutive therapeutic aPTTs, check aPTT in 24 hours Daily aPTT while results are within therapeutic range 	
70.1 to 90	Nil	No	<ul style="list-style-type: none"> Decrease rate by 1 mL/hr from current rate 	4-6 hours
90.1 to 105	Nil	No	<ul style="list-style-type: none"> Decrease rate by 2 mL/hr from current rate 	4-6 hours
Greater than 105	Nil	<ul style="list-style-type: none"> Yes - Stop for 90 minutes MO to assess patient for bleeding 	<ul style="list-style-type: none"> Restart infusion after 90 minutes & reduce previous rate by 2 mL/hr 	4-6 hours after recommencing infusion

HIGHER BLEEDING RISK PROTOCOL