

(place patient label here)
 Patient Name: _____



PROVIDER ORDERS

Order Set Directions:
 > (✓) - Check orders to activate; Orders with pre-checked box will be followed unless lined out.
 > Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made
 > Initial each page and Sign/Date/Time last page

Diagnosis: _____
 Allergies with reaction type: _____

Heparin Weight Based Infusion Protocol

Version 6

1/7/2020

Actual Weight: _____ Adj. Weight _____

Use actual body weight for all calculations unless >130% of IBW. If >130% of IBW then adjusted body weight (ABW) **must** be used.

Initiate WT Based Heparin Protocol

Standard (DVT/PE) Heparin Weight Based Infusion (Goal aPTT: 62-105 seconds)

Weight-based Heparin Infusion **WITH** loading dose **Select both**

- 80 unit/kilogram to MAX 10,000 Units intravenously once loading dose; Pharmacy to adjust initial dosing weight as needed
- 18 unit/kilogram per hour continuous intravenous infusion maintenance dose (MAX Infusion Rate 2,300 units per hour); titrate per Standard Heparin Weight Based Protocol (Pharmacy to adjust initial dosing weight as needed) Goal aPTT: 62-105 seconds
 Notify provider if not at goal aPTT within 24 hours

Weight-based Heparin Infusion **WITHOUT** loading dose

- 18 unit/kilogram per hour continuous intravenous infusion maintenance dose and titrate per Standard Heparin Weight Based Protocol (Pharmacy to adjust initial dosing weight as needed) Goal aPTT: 65-105 seconds
 Notify provider if not at goal aPTT within 24 hours

Standard Dose Protocol

MAXIMUM CONTINUOUS INFUSION RATE = 2,300 units/hour

<u>aPTT</u>	<u>Re-bolus</u>	<u>Hold Infusion</u>	<u>Rate Change</u>	<u>Repeat aPTT</u>
<52	80 units/kg or max 5,000 units	0 min	increase by 4 units/kg/hr	6 hours
52-64	40 units/kg or max 2,500 units	0 min	increase by 2 units/kg/hr	6 hours
65-105	No bolus	0 min	No Change	6 hours*
106-130	No bolus	0 min	decrease by 2 units/kg/hr	6 hours
>130	No bolus	1. Hold for 60 min then recheck PTT. 2. If PTT <130, restart with a decrease by 3 units/kg/hr. 3. If PTT >130, call provider for orders.		6 hours

***When 2 consecutive Q6 hour PTTs are between 65-105 without a rate change, check PTT once daily. If PTT falls below 65 or is above 105, adjust rate according to sliding scale and resume Q6 hour PTTs until level is between 65-105.**

Initials _____

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Low Dose (ACS) Heparin Weight Based Infusion (Goal aPTT: 50-70 seconds)

- May also be used with thrombolytics and/or antiplatelets

Weight-based Heparin Infusion **WITH** loading dose **Select both**

- 60 unit/kilogram to MAX 5,000 Units intravenously once loading dose; Pharmacy to adjust initial dosing weight as needed
- 12 unit/kilogram per hour continuous intravenous infusion maintenance dose (MAX Infusion Rate 2,300 units per hour); titrate per Low Dose (ACS) Heparin Weight Based Protocol (Pharmacy to adjust dosing weight as needed) Goal aPTT: 50-70 seconds
Notify provider if not at goal aPTT within 24 hours

Weight-based Heparin Infusion **WITHOUT** loading dose

- 12 unit/kilogram per hour continuous intravenous infusion maintenance dose (MAX Infusion Rate 2,300 units per hour); titrate per Low Dose (ACS) Heparin Weight Based Protocol (Pharmacy to adjust initial dosing weight as needed) Goal aPTT: 50-70 seconds
Notify provider if not at goal aPTT within 24 hours

Low Dose (ACS) Protocol

MAXIMUM CONTINUOUS INFUSION RATE = 2,300 units/hour

aPTT	Re-bolus	Hold Infusion	Rate Change	Repeat aPTT
<30	60 units/kg or max 5,000 units	0 min	increase by 3 units/kg/hr	6 hours
30-49	30 units/kg or max 2,500 units	0 min	increase by 2 units/kg/hr	6 hours
50-70	No bolus	0 min	No Change	6 hours*
71-95	No bolus	0 min	decrease by 2 units/kg/hr	6 hours
>95	No bolus	1. Hold for 90 min then recheck PTT. 2. If PTT <95, restart with a decrease by 3 units/kg/hr. 3. If PTT >95, call provider for orders.		6 hours

***When 2 consecutive Q6 hour PTTs are between 50-70 without a rate change, check PTT once daily. If PTT falls below 50 or is above 70, adjust rate according to sliding scale and resume Q6 hour PTTs until level is between 50-70.**

Laboratory

Labs to be ordered STAT

- PTT

MORNING DRAW

- PTT
- PT (PROTIME AND INR)
- CBC/NO DIFF

Provider Signature: _____ Date: _____ Time: _____