

## AntiThrombotic Medications

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### Management of Anticoagulant and Antiplatelet Therapy

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- **Antiplatelet Agents**
- **Heparin**
  - **Indications for Therapy**
  - **IV Unfractionated Heparin Dosing**
- **Warfarin**
  - **Indications for Therapy**
  - **Coumadin (Warfarin)**

Prior to making any medical decisions, please view our disclaimer.

### IV Unfractionated Heparin Dosing

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Dosing chart for administering Heparin.

Updated on Jan. 31, 2008.

Heparin use should be re-evaluated with any significant change in pt's neurologic function, or with unstable hemodynamics or evidence of bleeding.

UNFRACTIONATED HEPARIN INFUSION DOSING TEMPLATES	
Intensity	Indications and dosing
<b>Low:</b>	<b>Neuro:</b> Suspected or proven embolic stroke without high risk of stroke progression
Bolus:	none
Initial Infusion:	12 units/kg/hr to a max of 1,200 units/hr
Target PTT:	50-70 seconds
Lab:	Check PTT 6 hours after bolus or after any rate change
<b>Standard:</b>	<b>Neuro:</b> Cerebral venous sinus thrombosis or strokes at risk for progression. These include critical large vessel stenosis (carotid, basilar or MCA) or patients with fluctuating ischemic symptoms. Consider lower therapeutic range if large areas of infarction present or any ICH.
Bolus:	80 units/kg IV up to a max of 5,000 units
Initial Infusion:	12 units/kg/hr to a max of 1,200 units/hr for normal body habitus and 1,800 units/hr for morbid obesity
Target PTT:	50-70 or 60-84 seconds
Lab:	Check PTT 6 hours after bolus or after any rate change
<b>High:</b>	Peripheral Venous Thrombosis: DVT, PE  Consider lower therapeutic range if large areas of infarction present or any ICH.
Bolus:	80 units/kg IV up to a max of 7,500

Initial Infusion:	18 units/kg/hr max dose of 1800 units/hr
Target PTT:	60-84 seconds
Lab:	Check PTT 6 hours after bolus or after any rate change
<b>Other:</b>	Indication and dosing at Provider Discretion