Regional Clinical Practice Guidelines
For the Rapid Treatment of Age >65 Head Injury Patients

Age > 65 Head Injury Patient with ANY of the following:
- Witnessed or reported LOC
- Dizziness, vertigo, or ‘lightheadedness’
- Nausea or vomiting
- Changes in vision, photophobia or double vision
- Ataxia or new problems walking, standing, or maintaining balance
- Change in mental status, level of functioning or speech quality

Alert Physician
(patient to be seen ≤10 min of ER arrival)

Start Trauma Flow Sheet and Serial Neuro Exams

Orders:
- CT head/c-spine (read within 45min)
- PT/INR/PTT
- CBC/BMP
- Type & Screen (if indicated)
- Alcohol (if indicated)

CT Positive?

Anticoagulant?

Does PT/INR/PTT Meet Threshold for Correction/Reversal?

Consult Neurosurgeon (LIII/LIV) for Standard Level of Care
(If no Neurosurgical services available, contact MEDCOM (210) 233-5815 for transfer of patient.)

Anticoagulant?

NO

Serial monitoring
Q15-min GCS
Q15-min vital signs, including temperature
I/O documentation

YES

See Attached ACS Guidelines for Reversal of Anticoagulant

CT Negative?

Utilize Nursing Standards of Care for Care of Patient

Disposition:
- Admission/transfer, discharge home/nursing home (utilize case management if appropriate/needed)
Guideline for Reversal of Oral Anticoagulants

Patients who arrive with significant hemorrhage (intra-cranial, intra-abdominal, intra-thoracic) or needs emergent operative intervention

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**Warfarin (Coumadin®)**

**Check INR**

- **INR 1.4 - 3.9**
  - **Kcentra®** 25 units/kg IV x 1
  - Max Dose: 2500 units

- **INR 4 - 6**
  - **Kcentra®** 35 units/kg IV x 1
  - Max Dose: 3500 units

- **INR > 6**
  - **Kcentra®** 50 units/kg IV x 1
  - Max Dose: 5000 units

- 5-10 mg Vitamin K IV over 30 minutes x 1

Recheck INR 30 minutes after Kcentra® dose

**Kcentra®**=4-Factor PCC

Dose based on actual body weight up to 100kg. Cannot redose Kcentra®

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**Direct Oral Anticoagulants (DOAC)**

**Rivaroxaban (Xarelto®), Apixaban (Eliquis®), or Edoxaban (Savaysa®)**

Last dose taken within 3-5 half-lives of DOAC

- **Yes or Unknown Kcentra®**
  - 50 units/kg IV x 1
  - Max dose: 5000 units
- **No**
  - Provide supportive care

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**Dabigatran (Pradaxa®)**

**Check Thrombin Time (TT)**

(A normal thrombin time excludes clinically significant levels of dabigatran)

- Dabigatran taken within 24 hrs:
  - **Praxbind®** 5 grams IV x 1

- Dabigatran taken 24-48 hrs ago
  - **AND** TT is elevated:
    - **Praxbind®** 5 grams IV x 1

May consider an additional 5 gram dose if:
- Re-bleeding and TT is elevated
- 2nd emergent surgery is needed and TT is elevated

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**Kcentra®**=4-Factor PCC

If signs/symptoms of allergic reaction to infusion – stop infusion. Avoid Kcentra® in patients with history of HIT or allergy to albumin.

**Praxbind®**=Idarucizumab

Given as 2 consecutive 2.5 gram infusions. Praxbind contains 4 grams sorbitol. Consider this if calculating total daily amount of sorbitol/fructose in patients with hereditary fructose intolerance.

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