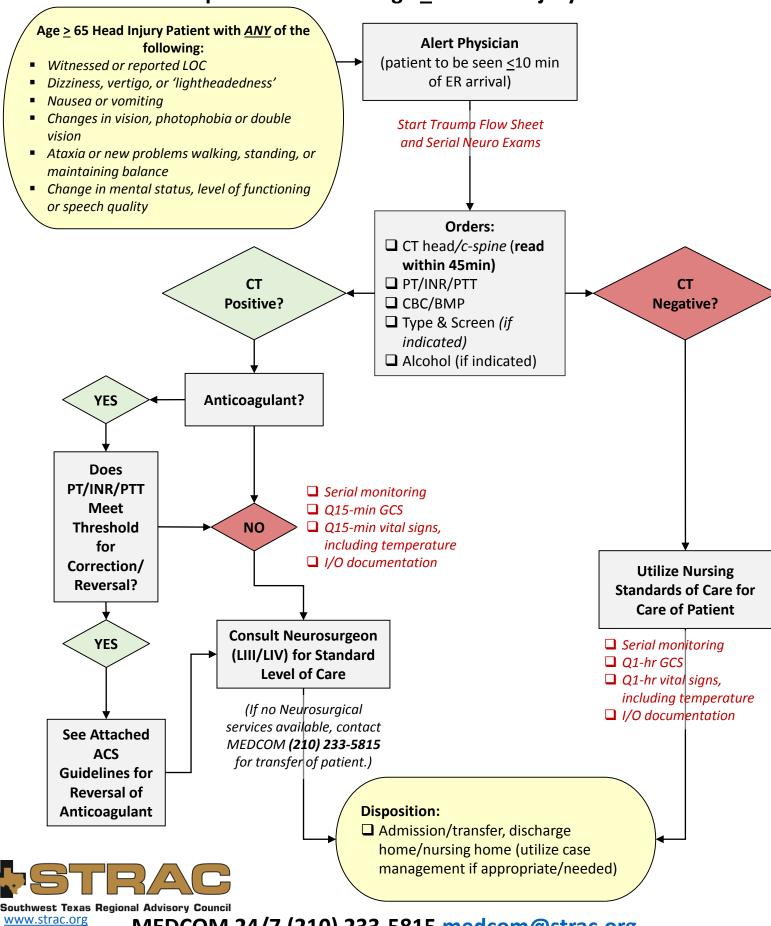
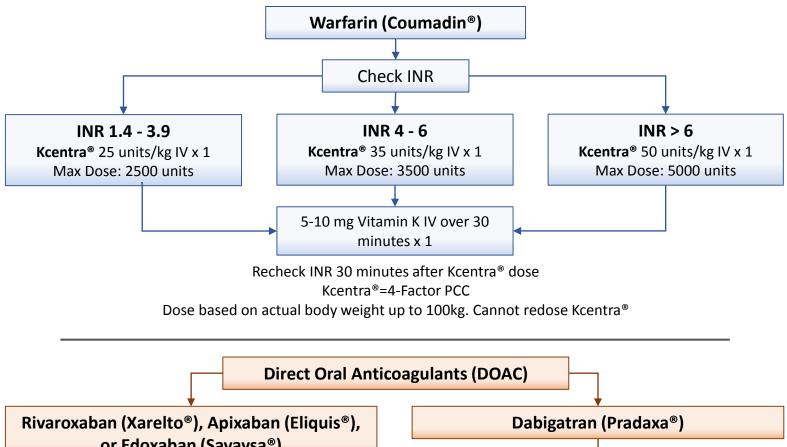
STRAC Systems PI Committee Regional Clinical Practice Guidelines For the Rapid Treatment of Age >65 Head Injury Patients



V1 2019 05

Guideline for Reversal of Oral Anticoagulants

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



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

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.

May consider an additional 5 gram dose if:

Check Thrombin Time (TT)

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

Re-bleeding and TT is elevated

Dabigatran taken

within 24 hrs:

Praxbind®

5 grams IV x 1

2nd emergent surgery is needed and TT is elevated

Original Prepared by: Rachel Garvin, M.D.,

Approved by the STRAC Executive Committee (05/2019) as modified from the UHS Anticoagulation Safety

Reference: 2012 ACCP Guidelines; Woo CH, et al. World Neurosurg 2014;81(1):110-15; Kuamatsu JB, et al. JAMA 2015;313(8):824-36;Idarucizumab (PRAXABIND®) package insert, Boehringer Ingelheim, December 2015. Frontera JA, et al. Neurocrit Care 2016;24:6-46.



Dabigatran taken

24-48 hrs ago

AND TT is elevated:

Praxbind®

5 grams IV x 1

Southwest Texas Regional Advisory Council www.strac.org

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