

## Heparin Infusion Nomogram

- All other orders for heparin products (i.e. heparin subcutaneous, enoxaparin) should be discontinued and not reordered/administered until heparin infusion has been discontinued.
- The standard concentration for heparin is 25,000 units/250 mL.
- Heparin doses should be rounded to the nearest 100 units/hr increment

### Monitoring:

- Obtain anti-Xa level 6 hours after starting the infusion and 6 hours after each change in the infusion rate.
- May decrease to daily anti-Xa once two consecutive anti-Xa levels are within the therapeutic range. If any daily anti-Xa level is outside of therapeutic goal, anti-Xa levels must be resumed every 6 hours after changing the infusion rate until two therapeutic levels are obtained again.
- Call physician if 2 consecutive anti-Xa levels are less than or equal to 0.19 OR greater than or equal to 0.9.
- Daily CBC
- Notify Physician
  - If platelet count decreases by 50% of baseline, or falls below 100,000 K/uL for possible Heparin Induced Thrombocytopenia (HIT).
  - If Hemoglobin decreases by 2 g/dL
  - If signs of bleeding occur

### Dose Adjustments:

Anti-Xa (units/mL)	Re-bolus	Hold Infusion	Rate Adjustment	Next Anti-Xa
Less than or equal to 0.19	80 units/kg	0 min	Increase by 4 units/kg/hr	6 hours
0.2-0.29	40 units/kg	0 min	Increase by 2 units/kg/hr	6 hours
Therapeutic Goal: 0.3-0.7	No bolus	0 min	No Change	6 hours*
0.71-0.8	No bolus	0 min	Decrease by 1 units/kg/hr	6 hours
0.81-1	No bolus	30 min	Decrease by 2 units/kg/hr	6 hours
Greater than or equal to 1.1	No bolus	60 min	Decrease by 3 units/kg/hr	6 hours

\* Once two consecutive anti-Xa levels are within range, may collect daily with AM labs

Source: February 2012; 141(2\_suppl) Antithrombotic Therapy and Prevention of Thrombosis, 9th ed: American

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