

Pediatric Anticoagulant Nomogram

Unfractionated Heparin Treatment Dosing Nomogram

Anti-Xa (units/mL)	Re-bolus	Hold infusion	Infusion rate adjustment	Next Anti-Xa
Less than 0.2	50 units/kg	0 mins	Increase rate 10%	4 hrs
0.2 – 0.29	0	0 mins	Increase rate 10%	4 hrs
0.3 – 0.7	0	0 mins	0	4 hrs *
0.71 – 0.9	0	0 mins	Decrease rate 10%	4 hrs
Greater than 0.9	0	60 mins	Decrease rate 15%	4 hrs

*May decrease to daily anti-Xa once two consecutive measurements are within the therapeutic range.

Enoxaparin Treatment Dose Adjustment

Anti-factor Xa for LMWH	Dose Titration	Time to Repeat Anti-factor Xa Level for LMWH
Less than 0.35 units/mL	Increase dose by 25%	4 hours after next dose
0.35 - 0.49 units/mL	Increase dose by 10%	4 hours after next dose
0.5 - 1 units/mL	Keep same dose	Next day, then weekly (4 hours after dose)
1.1 - 1.5 units/mL	Decrease dose by 20%	Before next dose
1.6 - 2 units/mL	Hold dose for 3 hours and decrease dose by 30%	Before next dose (confirm Anti-factor Xa has decreased to less than 0.5 Units/mL before giving new dose), then 4 hours after next dose
Greater than 2 units/mL	Hold all doses until Anti-factor Xa is 0.5 units/mL then decrease dose by 40%	Before next dose and every 12 hours until Anti-factor Xa is less than 0.5 units/mL

Warfarin Therapeutic Treatment (Nomogram Achieves INR 2.5)

Stage	INR	Action
Day 1	1-1.3	0.2 mg/ kg orally
	If liver Failure or INR greater than 1.3	0.1 mg/ kg orally
Day 2-4	1.1 – 1.3	Repeat day 1 loading dose
	1.4 – 1.9	50% of day 1 loading dose
	2 – 3	50% of day 1 loading dose
	3.1 – 3.5	25% of day 1 loading dose
	Greater than 3.5	Hold until INR is less than 3.5 then restart at 50% of dose
Maintenance (Day 5 and beyond)	1.1 – 1.4	Increase by 20% of dose
	1.5 – 1.9	Increase by 10% of dose
	2 – 3	No change
	3.1 – 3.5	Decrease by 10% of dose
	Greater than 3.5	Hold until INR is less than 3.5 then restart at 80% of dose

Warfarin Target INR

Indication	Target INR	Length of Therapy
Arterial Ischemic Stroke + cardioembolic stroke or vascular dissection		3-6 months
CVL (on long-term TPN)	2-2.5	First 3 months after CVL inserted
CVL related Thrombosis (Treatment)	2-3 (2.5)	3 months then prophylactic doses
Dilated Cardiomyopathy (prophylaxis)	2-3 (2.5)	chronic
Fontan surgery (prophylaxis)	2-3 (2.5)	
Kawasaki with coronary aneurysms	2-3 (2.5)	
Prosthetic heart valves (Biological)	2-3 (2.5)	3-12 months
Prosthetic Heart Valve (Mechanical)		
• St. Jude Medical Bileaflet valve	2-3 (2.5)	chronic
• CarboMedics bileaflet valve in aortic position	2-3 (2.5)	chronic
• Mechanical valves and additional risk factors	2.5-3.5 (3)	chronic
• Tilting disk valves and bileaflet mechanical valves in mitral position	2.5-3.5 (3)	chronic
Pulmonary Hypertension	1.8-2	
Recurrent Thromboembolism		
• Idiopathic	2-3 (2.5)	Indefinite
• Secondary	2-3 (2.5)	3 months or removal of precipitating factors
Sinovenous thrombosis without ICH in children	2-3 (2.5)	3-6 months
Venous Thromboembolism (VTE) Children greater than 2 months of age		
• Idiopathic	2-3 (2.5)	6 months for idiopathic
• Secondary	2-3 (2.5)	3 months