

## Modified Heparin Weight-Based Protocol For “Cardio Vascular Use” Goal aPTT 50-70

\_\_\_\_\_ Date

HT:	WT:	IBW:	AjBW:
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1. If actual body weight >120% ideal body weight (IBW), use adjusted body weight (AjBW) to calculate doses and rates.
2. Heparin Bolus \_\_\_\_\_ units (42 units/kg), IV PUSH (max. 2,800 units)
3. Heparin infusion at \_\_\_\_\_ unit/hr (9 units/kg/hr with max. 700 units/hr) = \_\_\_\_\_ ml/hr.
4. Laboratory:
  - a. aPTT, PT, CBC before any heparin
  - b. CBC every third day. Call if Platelet count < 100,000 or falls > 30% from baseline.
  - c. Initial aPTT 6 hours after initial heparin bolus.
  - d. Daily PT if on Coumadin
5. Document aPTT, boluses, and rate changes on MAR.
6. All Heparin will be a premixed bag of 50 units/ml concentration.
7. Use Heparin nomograms below to maintain aPTT 50-70 sec. Discontinue Heparin if significant bleeding occurs and contact physician.

### Nomogram for Heparin Goal aPTT 50-70

aPTT	Bolus Dose	Stop Infusion	Rate Change	Repeat aPTT
<43	_____ units (=42 units/kg)	-----	+ _____ ml/hr (Increase by 4 units/kg/hr)	6 hours
43-49	_____ units (=28 units/kg)	-----	+ _____ ml/hr (Increase by 2 units/kg/hr)	6 hours
50-70	0	-----	No Change	12 hours
71-76	0	-----	- _____ ml/hr (Decrease by 2 units/kg/hr)	6 hours
>76	0	1 hour	- _____ ml/hr (Decrease by 3 units/kg/hr)	6 hours

\*If two consecutive aPTT's >76 or <43, call M.D.