

## Modified Heparin Weight-Based Protocol For "DVT/PE Treatment" Goal aPTT 50-80

Date

	W/T·		
пі	VVI.	IBVV.	AJBVV.

- 1. If actual body weight >120% ideal body weight (IBW), use adjusted body weight (AjBW) to calculate doses and rates.
- 2. Heparin Bolus \_\_\_\_\_ units (58 units/kg) IV PUSH. (Max 7,200 units)
- 3. Heparin infusion at \_\_\_\_\_\_ unit/hr (=13 units/kg/hr) = \_\_\_\_\_ml/hr. (Max 1,400 units/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 50-80 sec. Discontinue Heparin if significant bleeding occurs and contact physician.

aPTT	Bolus Dose	Stop Infusion	Rate Change	Repeat aPTT		
<43	units (=58 units/kg)		+ ml/hr (Increase by 4 units/kg/hr)	6 hours		
43-49	units (=29 units/kg)		+ ml/hr (Increase by 2 units/kg/hr)	6 hours		
50-80	0		No Change	12 hours		
81-83	0		ml/hr (Decrease by 2 units/kg/hr)	6 hours		
>83	0	1 hour	ml/hr (Decrease by 3 units/kg/hr)	6 hours		

## Nomogram for Heparin Goal aPTT 50-80

\*If two consecutive aPTT's >83 or <43, call M.D.