

Our Lady of the Lake Regional Medical Center

Pharmacy Anticoagulation Stewardship

Clinical Practice Guideline: Pre and Post-procedural management of Direct Oral Anticoagulant (DOAC)

DOAC	Procedure bleeding risk	Current CrCl	Pre-procedure DOAC interruption	Day of procedure	Post-procedure DOAC resumption
Apixaban	HIGH	>50 ml/min	Stop 2 days prior to procedure	NO DOAC	Resume 48 - 72 hours
		30 – 50 ml/min	Stop 2 - 3 days prior to procedure		
	LOW	>50 ml/min	Stop 1 day prior to procedure		Resume 24 hours
		30 – 50 ml/min	Stop 1 - 2 days prior to procedure		
Edoxaban	HIGH	≥ 50 mL/min	Stop 2 days prior to procedure	NO DOAC	Resume 48 – 72 hours
		30 – 49 ml/min	Stop 2 - 3 days prior to procedure		
	LOW	≥ 50 mL/min	Stop 1 day prior to procedure		Resume 24 hours
		30 – 49 ml/min	Stop 1 - 2 days prior to procedure		
Dabigatran	HIGH	≥ 50 mL/min	Stop 2 - 3 days prior to procedure	NO DOAC	Resume 48 - 72 hours
		30 – 49 ml/min	Stop 4 - 5 days prior to procedure		
	LOW	≥ 50 mL/min	Stop 1 day prior to procedure		Resume 24 hours
		30 – 49 ml/min	Stop 2 - 3 days prior to procedure		
Rivaroxaban	HIGH	>50 ml/min	Stop 2 days prior to procedure	NO DOAC	Resume 48 - 72 hours
		15 – 50 ml/min	Stop 2 - 3 days prior to procedure		
	LOW	>50 ml/min	Stop 1 day prior to procedure		Resume 24 hours
		15 – 50 ml/min	Stop 1 - 2 days prior to procedure		

This Guideline Review and Revision information

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