

SESLHD PROCEDURE

Anticoagulation with Intravenous Heparin Sodium Infusion

SESLHDPR/402

Acute

Syndrome

APPENDIX B – Acute Coronary Syndrome and Higher Bleeding Risk Protocol (Where bleeding risk needs to be minimised) ⁵

IV HEPARIN ACUTE CORONARY SYNDROME AND HIGHER BLEEDING RISK PROTOCOL

Initial IV bolus dosage:

- Use Heparin Sodium 5,000 units in 5 mL ampoules/ concentration
- For patients weighing 60 kg and over administer a bolus dose of 4000 units
- For patients weighing less than 60 kg administer a weight based bolus of 60 units/kg (calculated below)
- There may be circumstances where the bolus dose is omitted, for example if the patient is receiving another anticoagulant agent and a delayed onset of anticoagulant effect is required

Bolus Dose for F	Patients	weighing	60	kg	and	over
------------------	----------	----------	----	----	-----	------

Weight	Bolus
(kg)	(Units)
60 kg and over	4000

Weight Based Bolus Dose			
Weight	BOLUS		
(kg)	(Units)		
40 kg	2400		
45 kg	2700		
50 kg	3000		
55 kg	3300		

IV HEPARIN ACUTE CORONARY SYNDROME & HIGHER BLEEDING RISK PROTOCOL

Infusion Initiation Protocol:

- Use Premixed Solution of Heparin Sodium 25,000 units in 250 mL Sodium Chloride 0.9% (100 units per ml)
- Initial infusion rate based on 12 units/kg/hr, rounded to nearest 1 mL per hour (calculated below)
- The initial infusion rate should not exceed 1,000 units/hr

Weight (kg)	Units per Hour	Infusion Pump Starting Rate (mL/hr)	Acute
40	480 Units	5	lig!
45	540 Units	5	oro
50	600 Units	6	na - B
55	660 Units	7	ry :
60	720 Units	7	Syr
65	780 Units	8	ndr Ig F
70	840 Units	8	Ris
75	900 Units	9	ж Пе
80 and	960 Units	10	and
over			_ 0

Version: 8.1 Ref: T15/8425 Date: 15 November 2023 Page 17 of 19

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY



SESLHD PROCEDURE

Anticoagulation with Intravenous Heparin Sodium Infusion

SESLHDPR/402

IV HEPARIN INFUSION RATE ADJUSTMENT NOMOGRAM (adjust infusion rate according to the APTT)

APTT (seconds)	Bolus Dose	Stop Infusion	IV Rate Change (mL/hr)	Repeat APTT	
Less than 45	Nil	No	 Increase rate by 1 mL/hr from current rate 	4-6 hours	ACUTE
45-70		Therapeutic Range No change from current rate		 Repeat at 6 Hours After 2 consecutive therapeutic APTTs, check APTT in 24 hours Daily APTT while results are within therapeutic range 	
70.1 to 90	Nil	No	Decrease rate by 1 mL/hr from current rate	4-6 hours	ND HIGHER B
90.1 to 105	Nil	No	Decrease rate by 2 mL/hr from current rate	4-6 hours	ACUTE CORONARY SYNDROME AND HIGHER BLEEDING RISK PROTOCOL
Greater than 105	Nil	 Yes - Stop for 90 minutes MO to assess patient for bleeding 	Restart infusion after 90 minutes & reduce previous rate by 2 mL/hr	4-6 hours after recommencing infusion	PROTOCOL

Version: 8.1 Ref: T15/8425 Date: 15 November 2023 Page 18 of 19