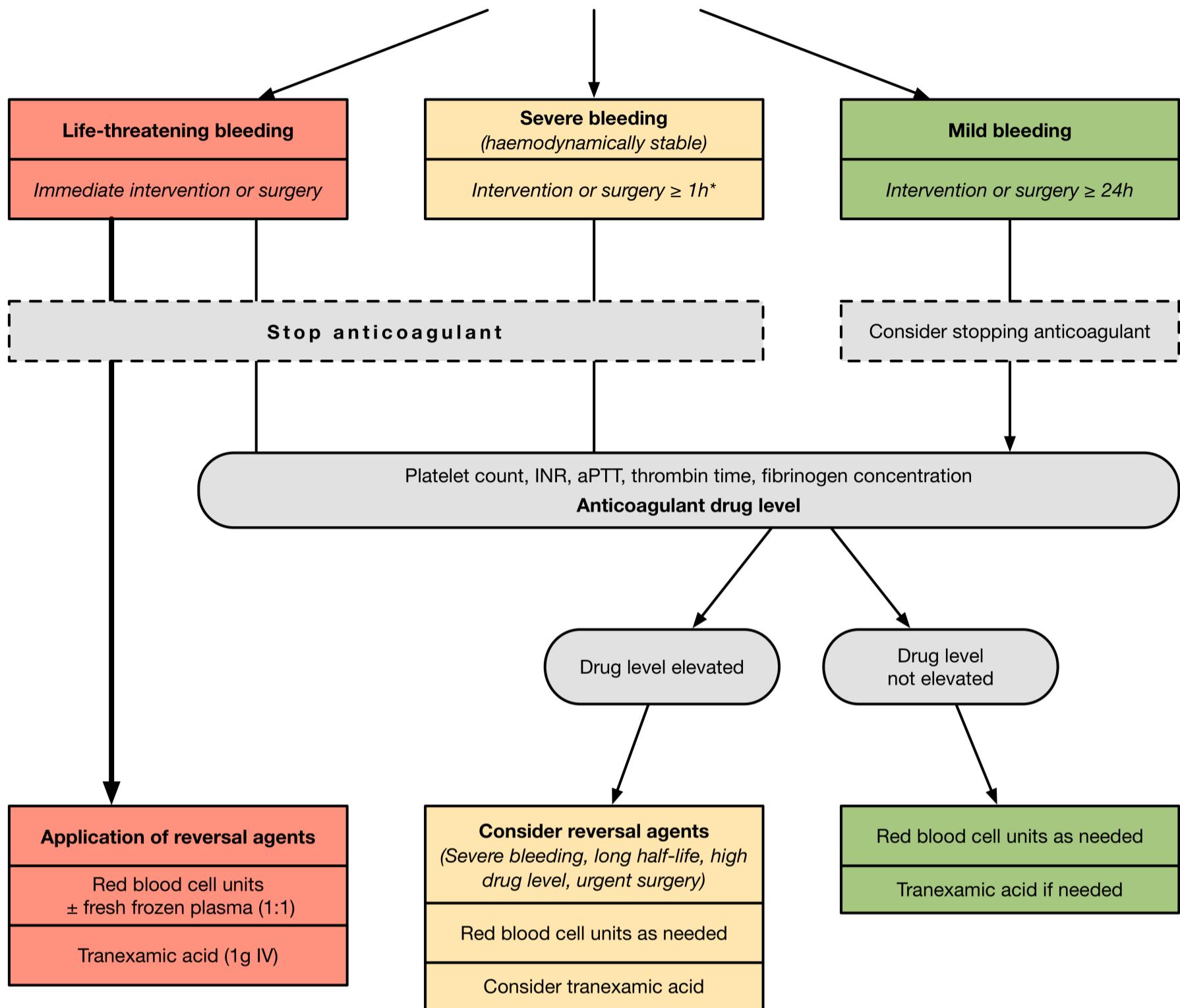


Supposed treatment with anticoagulants



Relevant anticoagulant drug-levels	
UFH:	aPTT > internal reference (e.g. 35 s) anti-Xa activity > 0.1 U/mL (thrombin time > internal reference, e.g. 30s)
LMWH:	anti-Xa activity > 0.15 U/mL
VKA:	INR > 1.3 (PT > internal reference; Quick-test < 70%)
Rivaroxaban:	anti-Xa activity > 30-50 ng/mL
Apixaban:	anti-Xa activity > 30-50 ng/mL
Dabigatran:	diluted thrombin time (or ecarin clotting time) > 30-50 ng/mL
Edoxaban:	anti-Xa activity > 30-50 ng/mL

\* time interval until laboratory results are available

Reversal agents	
UFH:	<ul style="list-style-type: none"> <li>• 1:1 units of <b>protamin</b> IV per unit UFH given in previous 3 hours (if stop within previous hour or anti-Xa activity &gt; 0.35 U/mL), 5000 IU maximum</li> <li>• ½:1 units of <b>protamin</b> IV per unit UFH given in previous 3 hours (if UFH stop within previous 3 hours or anti-Xa activity &gt; 0.1 U/mL), 2500 IU maximum</li> </ul>
LMWH:	<ul style="list-style-type: none"> <li>• 5000 IU <b>protamine sulphate</b> IV if therapeutic dose LMWH and last application &lt; 8h or anti-Xa &gt; 0.5 U/mL</li> <li>• 2500 IU <b>protamine sulphate</b> IV if therapeutic dose LMWH and last application &lt; 12h or anti-Xa &gt; 0.3 U/mL</li> </ul>
VKA:	<ul style="list-style-type: none"> <li>• <b>Prothrombin complex concentrate</b>: 2400 IU IV (or 30 U/kg body weight in patients below 30 kg)</li> <li>• Vitamin K 10 mg IV (daily until recovery)</li> </ul>
Rivaroxaban/ Apixaban/ Edoxaban:	<ul style="list-style-type: none"> <li>• <b>Prothrombin complex concentrate</b>: 50 IU per kg body weight IV</li> </ul>
Dabigatran:	<ul style="list-style-type: none"> <li>• <b>Idarucizumab</b> (Praxbind®) 2 x 2.5 g IV</li> </ul>