PROCEDURE GUIDELINES

\Rightarrow Stopping Anticoagulants Before Surgery Guide

Patients taking anticoagulants (blood thinners) should stop them before any invasive procedure(s). The concern is uncontrolled bleeding. This *must be discussed with the surgeon* prior to having any invasive procedure.

Examples of prescription blood thinners include:

•	Coumadins: Antiplatelet drugs:	Coumadin (warfarin), Jantoven (warfarin) Agrylin (Anagrelide), Plavix (clopidogrel), Ticlid (ticlopidine), Dipyridamole (Aggrenox, Persantine), Pentoxyphylline (Trental), Cilostazol (Pletal), Effient (prasugrel), Brilinta (Ticagrelor)		
•	Heparin Anticoagulants: Other Anticoagulants:	Lovenox (enoxaparin, LMWH), Heparin (unfractionated), Fragmin (Dalteparin) Xarelto (rivaroxaban), Pradaxa (dabigatran), Eliquis (apixaban), Arixtra (fondaparinux)		

Examples of over the counter blood thinner medications:

• NSAID's : Aspirins and NSAID's (Advil/ibuprofen, Motrin, Aleve, celebrex, diclofenec, indomethacin, bextra...)

Tylenol is not a blood thinner. It is safe to use when off your blood thinners/around surgery time.

WHEN TO STOP

STOP	Coumadins,	for at least 5 full days before an invasive procedure.
<u>STOP</u>	ALL Antiplatelet Drugs,	for at least 7 full days before an invasive procedure
<u>STOP</u>	Heparin Anticoagulants,	for at least 24hrs before an invasive procedure
<u>STOP</u>	All Other Anticoagulants Drugs	, for at least 2 full days (if have renal disease/failure 5 days) before an invasive
<u>STOP</u>	ALL NSAID's,	for 7 full days before an invasive procedure.

WHEN TO RESTART

<u>RESTART</u> Most Anticoagulants can be restarted the evening of your procedure or the next day after the invasive procedure. Must Speak with surgeon prior to restarting after the invasive procedure is completed.

WHILE OFF ANTICOAGULANTS

<u>WHILE off Blood Thinner(s)</u>, patient may require a different blood thinner to protect them while off their regular anticoagulant. Patient history is very important to if another anticoagulant is required during the period patient is off their regular blood thinner. Please review Peri-Operative Anticoagulation Guidelines as needed.

WHAT TO TELL THE PATIENT

STOP (drug name):	
STOP ON (date):	RESTART ON (date):
NEXT PT/INR (date): [] Not applicable	(in AM)
[] Not Applicable	
START NEW DRUG (drug name):	
START ON (date):	STOP ON (date):

Common procedures and associated bleeding risks

- Low and high bleeding risk procedures below are in reference to pts on warfarin
- Less data is available for pts on **oral direct factor** inhibitors (apixaban, dabigatran, rivaroxaban, or edoxaban). Collaboration w/ proceduralist is highly recommended
- Contact proceduralist/surgeon for specific indications or questions in individual pt clinical scenerios

If procedure not listed, check w/ procedural area:

Anesthesiology/Pain medicine/Radiology		
(See also Interventional Radiology)		
High-risk bleeding	Non high-risk bleeding	
 Facet joint and medial branch nerve blocks (MBNB) (c,t)* Facet joint radiofrequency ablation (RFA) (c,t,l)* Interlaminar epidural injections (c,t,l)* Intradiscal procedures (c,t,l)* Paravertebral block (c,t,l)* Selective nerve root blocks (c,t,l)* Spinal and epidural anesthesia Sympathetic and neurolytic blocks Transforaminal epidural injections (c,t,l)* 	 Endotracheal intubation Face joint and medial branch blocks (lumbar) Peripheral musculoskeletal (MSK), joint, and nerve injections Sacroiliac joint injection and sacral lateral branch blocks (SLBB) Trigger point injections, incl piriformis 	
c=cervical; t=thoracic; l=lumbar * Potential for profound neurologic consequences		

Breast/Breast reconstruction		
High-risk bleeding	Non high-risk bleeding	
Any breast surgery	 Breast fine needle biopsy (FNA) (if INR <2.5) 	

•	Breast core needle biopsy (if INR
	<2.5)

Cardiac surgery	
High-risk bleeding	Non high-risk bleeding
• All	None

Cardiovascular		
High-risk bleeding	Non high-risk bleeding	
 Diagnostic coronary angiography⁺ (femoral and brachial access) Cardiac implantable electronic devices (pacemaker, ICD) Device removal Lead extraction Pocket revision Transcatheter valve therapies 	 Ablation, radiofrequency Bx, right ventricle; trans-septal procedures (if INR, 1.5) Defibrillator threshold testing[†] Diagnostic coronary angiography[†] (radial access) Electrophysiology testing and/or ablation[†] In general pacemaker procedures (pacemaker generator change, LV and standard lead placement)[†] are low bleeding risk. Pacemaker/defibrillator placement while on therapeutic warfarin carries slightly increased bleeding risk. Use of bridging anticoagulation greatly increases bleeding risk. Questions should be directed to the procedural area. 	
† Consider contacting procedural area with any questions		

Dental		
High-risk bleeding	Non high-risk bleeding	
Reconstructive procedures	Endodontic procedures (root canal)	
Tooth extraction		

Dermatology		
High-risk bleeding	Non high-risk bleeding	
• None	 Major procedures (wide excision of melanoma) Minor skin procedures (excision of basal and squamous cell cancers, nevi, actinic keratoses, premalignant lesions) 	

Gastroenterology		
High-risk bleeding	Non high-risk bleeding	
 Large polypectomy (>1 cm) Endoscopic mucosal and submucosal dissection Biliary or pancreatic sphincterotomy Percutaneous endoscopic gastrostomy Endoscopic US w/ fine-needle aspiration or needle bx Coagulation or ablation of tumors, vascular lesions Percutaneous liver bx Variceal band ligation (controversial) Laser ablation and/or coagulation 	 Passage of endoscope for dx purposes (including balloon enteroscopy) w/ or w/o mucosal bx Endoscopic retrograde cholangiopancreatography w/o sphincterotomy Endoscopic US w/o fine-needle aspiration Nonthermal (cold) snare removal of small polyps Lumenal self-expanding metal stent placement (controversial) Enteroscopy (incl balloon assisted) Capsule endoscopy 	

General surgery	
High-risk bleeding	Non high-risk bleeding
Major tissue injury	Suture of superficial wound

Vascular organs (spleen, liver,	
kidney)	
Bowel resection	
Laparoscopy	

Hematology	
High-risk bleeding	Non high-risk bleeding
None	Bone marrow bx

Interventional Radiology	
(See also Anesthesiology/Pain medicine/Radiology)	
High-risk bleeding	Non high-risk bleeding
Spine pro	ocedures
 Epidural injection Epidural blood patch Lumbar punctures (spinal tap) Myelogram Vertebroplasty/kyphoplasty/ sacroplasty Facet joint and medial branch nerve blocks (MBNB) (c,t)* Facet joint radiofrequency ablation (RFA) (c,t,l)* Interlaminar epidural injections (c,t,l)* Intradiscal procedures (c,t,l)* Selective nerve root blocks (c,t,l)* Transforaminal epidural injections (c,t,l)* 	 Facet joint and medial branch blocks (lumbar) Sacroiliac joint injection and sacral lateral branch blocks (SLBB) Trigger point injections, incl piriformis
High-risk bleeding	Non high-risk bleeding
Non-spine	procedures
 Aggressive manipulation of drains or dilation of tracts Angiography/arterial stenting 	 Aspiration of abdominal or pelvic abscesses, placement of small- caliber drains

• Arterial access (eg, femoral or	Central line placement, internal
brachial)	jugular and subclavian central
• Bx of organs (liver, lung, kidney)	Central line removal
Deep bone bx	Chest tube placement
• Deep organ or soft tissue bx or drain	• Dialysis access interventions, incl
 Percutaneous drainage of liver 	temporary dialysis catheter
abscess	placement
 Cholecystostomy 	Inferior vena cava (IVC) filter
 Nephrostomy 	placement
Hickman and tunneled dialysis	Paracentesis
catheter placement	• Peripheral catheter placement,
Percutaneous transhepatic	nontunneled catheter (eg, PICC)
cholangiography (PTC)	placement
• Percutaneous tumor ablation (RFA,	Peripheral MSK, joint, and nerve
cryoablation)	injections
Transjugular intrahepatic	• Simple catheter exchange in well-
portosystemic shunt (TIPS)	formed, nonvascular tracts (eg,
Transjugular liver bx	gastrostomy, nephrostomy,
	cholecystostomy tubes)
	 Superficial bx/drainage
	Superficial bone bx
	Thoracentesis
	Transarterial chemoembolization
	Venous ablation
	Venography/venous interventions
	Breast fine needle biopsy (FNA) (if
	INR <2.5)
	Breast core needle biopsy (if INR
	<2.5)
c=cervical; t=thoracic; l=lumbar	
* Potential for profound neurologic consequence	ces

Intravascular procedures	
High-risk bleeding	Non high-risk bleeding
Arterial puncture	Venous access
Transvenous ablation	

Neurosurgery	
High-risk bleeding	Non high-risk bleeding
 Intracranial, spinal surgery* 	None
• Lumbar punctures (spinal tap)	
* Potential for profound neurologic consequence	es
Obstetrics and Gynecology	
High-risk bleeding	Non high-risk bleeding
Cesarean delivery	Colposcopy
Operative vaginal delivery	Hysteroscopy
Hysterectomy	 Dilation and curettage
Laparotomy	Endometrial bx
Oophorectomy	Insertion of IUD
Oncologic surgery	
Bowel resection	
Operative laparoscopy	

Ophthalmology	
High-risk bleeding	Non high-risk bleeding
All others	Cataract

Orthopedic procedures	
High-risk bleeding	Non high-risk bleeding
Joint replacement	Arthrocentesis
Arthroscopy	Sacroiliac joint injections
• Some head and neck injections	 Peripheral joint injections
Lumbar facet joint injections	• Trigger point injections (possibly w/
	exception of head and neck
	injections)

Otolaryngologic surgery	
High-risk bleeding	Non high-risk bleeding

 Any sinus surgery Biopsy or removal of nasal polyps Thyroidectomy Parotidectomy Septoplasty Turbinate cautery 	 Diagnostic fiberoptic laryngoscopy or nasopharyngoscopy, sinus endoscopy Fine-needle aspiration Vocal cord injection 	
Plastic surgery		
High-risk bleeding	Non high-risk bleeding	
Reconstructive surgery	 Injection tx (Botox, fillers) 	
Aesthetic (cosmetic) surgery	Laser tx	
Hand surgery		
 Breast implant surgery 		

Pulmonary	
High-risk bleeding	Non high-risk bleeding
• Endobronchial tumor removal (laser, rigid bronchoscopy)	 Diagnostic bronchoscopy w/ or w/o bronchioalveolar lavage
• Transbronchoscopic bx, cryobiopsy	Endobronchial fine-needle aspirate
Stricture dilation	Airway stent placement

Rheumatology	
High-risk bleeding	Non high-risk bleeding
None	Arthrocentesis

Urology	
High-risk bleeding	Non high-risk bleeding
Extracorporeal shock-wave	Circumcision
lithotripsy	Cystoscopy w/o bx
Transurethral prostatectomy	
Bladder resection	
Tumor ablation	
Kidney bx	

Vascular surgery	
High-risk bleeding	Non high-risk bleeding
Carotid endarterectomy	Venous ablation
Open or endovascular aneurysm	
repair	
 Vascular bypass grafting 	
Arterial stenting	
Venous phlebectomy	