

Appendix 1. Dosing nomogram for IV unfractionated heparin for patients with non-ST-elevation acute coronary syndrome. Copyright © 2004 Director of Pharmacy, The Ottawa Hospital. Reproduced by permission.

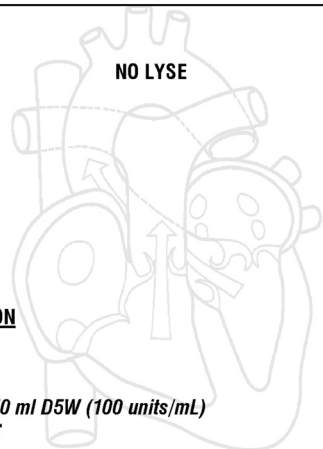


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**Acute Coronary Syndrome
 Syndrome Coronarien Aigü**

**UNFRACTIONATED HEPARIN NOMOGRAM
 NOMOGRAMME POUR L'HÉPARINE NON FRACTIONNÉE**

IV HEPARIN FOR NON-ST ELEVATION ACUTE CORONARY SYNDROME HÉPARINE IV POUR SYNDROME CORONARIEN AIGÛ SANS ÉLÉVATION DU SEGMENT ST		
1. Patient weight _____ kg		
2. Lab: PTT INR CBC Now Daily CBC		
Anti-Xa assay for standard heparin STAT 6 hrs after starting infusion		
3. Initial heparin bolus and infusion Check appropriate weight.		
WEIGHT (kg)	INITIAL HEPARIN BOLUS As IV Push over 30-60 seconds	INITIAL HEPARIN INFUSION
<input type="checkbox"/> <51	<i>Heparin 1,000 unit/mL</i> 3,000 units (3 mL)	<i>Heparin 25,000 units in 250 ml D5W (100 units/mL)</i> 600 units/hr = 6 mL/hr
<input type="checkbox"/> 51 - 60	3,500 units (3.5 mL)	700 units/hr = 7 mL/h
<input type="checkbox"/> 61 - 70	4,000 units (4 mL)	800 units/hr = 8 mL/hr
<input type="checkbox"/> 71 - 80	4,500 units (4.5 mL)	900 units/hr = 9 mL/hr
<input type="checkbox"/> >80	5,000 units (5 mL)	1,000 units/hr = 10 mL/hr
4. Dose adjustments		
Anti-Xa ASSAY RESULT	HEPARIN ADJUSTMENT	NEXT Anti-Xa ASSAY
< 0.2	2500 Unit bolus, Increase rate by 100 Units/Hr, 1 mL/Hr	in 6 hours
0.2-0.3	Increase rate by 100 Units/Hr, 1 mL/Hr	in 6 hours
0.31-0.7	No change	next morning, and daily
0.71-0.8	Decrease rate by 100 Units/Hr, 1 mL/Hr	in 6 hours
> 0.8	Stop infusion for one hour then Decrease rate by 150 Units/Hr, 1.5 mL/Hr	in 6 hours
If 2 consecutive anti-Xa assay >0.8, then call physician.		
Date:	Time-Heure:	Physician's-Médecin printed-imprimé: Signature:
Date (noted-notée):	Time-Heure:	Processed by-Traitée par: Signature (Nurse-Infirmière):



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SPO 75 A (01/2004) Cat: 413510 1-CHART-DOSSIER 2-PHARMACY-PHARMACIE 3-NURSING-SOINS INFIRMIERES

Supplementary material for Jacques AC, Lougheed C, MacDonald E, Karovitch A, Giguère P. Effectiveness of unfractionated heparin in normal saline versus dextrose for achieving and maintaining therapeutic anti-factor Xa levels in patients with non-ST-elevation acute coronary syndrome. *Can J Hosp Pharm.* 2013;66(6):347-54.