



Bon Secours
Richmond Health System

Place patient label inside box (if no patient label, complete below)

NAME: **PROOF**
DOB:
MR #:

ARGATROBAN PROTOCOL FOR HIT/ISOLATED HIT

THIS PATIENT IS ALLERGIC TO

All orders must include date, time, and physician signature.

NKA

COPY

Date: _____ Estimated Length of Stay: _____
ADMIT TO (Status) _____

Hospital admission is certified necessary for the following reasons:

Plan of Care: See progress notes, H&P, and physician orders

D/C Plan: _____

Physician Signature: _____

Orders (other than medications)

Medication & I.V. Fluid Orders

- Patient must be in critical care or step down unit
- Baseline PTT, PT/INR, Creatinine, CMP, HCT, Platelet Count
- Platelet count every day
- All PTTs are to be run stat
- PTT 2 hr and 6 hr after initiation of Argatroban
- PTT 4 hr after any dosage change until two consecutive PTTs are therapeutic (40-83 seconds) then change PTT to Qday
- If PTT is greater than 100 seconds stop argatroban, draw PTT every 2 hours until PTT is 40-83 seconds then restart Argatroban at new rate (see Rate Chart)
- Daily INR after warfarin started as noted below

- Discontinue all **Heparin, Heparin flushes, Enoxaparin (Lovenox) and Dalteparin (Fragmin)**
- Document **heparin** allergy in chart
- Discontinue **Warfarin (Coumadin)**
- Phytonadione (Vitamin K) 10 mg subQ x1** (if the patient has been on warfarin)
- Discontinue all IM injections (physician to give order for alternate route of administration)
- Argatroban** infusion:
 - 2 mcg/kg/min** if hepatic disease score per table is less than or equal to 6
 - 1 mcg/kg/min** if creatinine clearance is less than 60 ml/min and hepatic disease score is less than or equal to 6.
 - 0.5 mcg/kg/min** if hepatic disease score per table is greater than 6
- Adjust **Argatroban** rate per PTT using **Argatroban** rate adjustment chart
- Pharmacy to send initial infusion rate chart and rate adjustment chart to floor with **Argatroban** infusion
- Warfarin (Coumadin)** _____mg (range 2 - 5mg) **Qday** once platelet count is greater than 150,000 per mm3
- Goal INR while argatroban infusing at or below 2 mcg/kg/min is 4-5.
- Discontinue **Argatroban** when two consecutive **daily INRs** are 2 to 3 (**on Warfarin** alone, **see step 8 on left**) and Warfarin therapy has overlapped **Argatroban** therapy for at least 5 days.

a. If argatroban dose is greater than 2 mcg/kg/min, reduce argatroban to 2 mcg/kg/min for 4 hours, draw INR, If INR greater than 4, on warfarin and argatroban, stop argatroban, draw INR four hours later, restart argatroban immediately after INR drawn at original rate. Use second INR for warfarin dosage adjustments.

b. If argatroban dose is less than or equal to 2 mcg/kg/min, drawn INR. If INR greater than 4, on warfarin and argatroban, stop argatroban, draw INR four hours later, restart argatroban immediately after INR drawn at prior rate. Use second INR for warfarin dosage adjustments.

- Guaic all stools, gastrocuccut all emesis, visually check for hematuria or other bleeding.
- Notify physician immediately for unexplained drop in blood pressure, development of hematoma, drop in HCT, flank pain, bright red urine, bruising or other signs of bleeding

Hepatic Disease Score for Argatroban Dosing			
	1 point	2 points	3 points
Bilirubin (mg/dl)	less than 2	2-3	greater than 3
	less than 4 for patients with primary biliary cirrhosis	4-10 for patients with primary biliary cirrhosis	greater than 10 for patients with primary biliary cirrhosis
Albumin (g/dl)	greater than 3.5	2.8-3.5	less than 2.8
PT prolongation (INR)	less than 4 seconds (INR less than 1.7)	4-6 seconds (INR 1.7-2.3)	greater than 6 seconds (INR greater than 2.3)
Ascites	Absent	Slight	Moderate
Encephalopathy	Absent	Mild (1-2)	Severe (3-4)

To calculate the Hepatic Disease Score, determine the individual score (1,2,3) for each parameter. If the sum of all parameters is greater than 6 then the patient should be started on 0.5 mcg/kg/min of Argatroban.

Stages of Hepatic Encephalopathy

- Stage 1: Euphoria or depression, mild confusion, slurred speech, disordered sleep
- Stage 2: Lethargy, moderate confusion
- Stage 3: Marked confusion, incoherent speech, sleeping but arousable
- Stage 4: Coma, initially responsive to noxious stimuli, but later unresponsive

Tab # _____

Form Number _____

Most common do not use abbreviations