

**Adult Heparin Protocols at the Downstate Health Sciences University**  
**Updated JANUARY 2026**

Disclaimer: This protocol is not meant to substitute professional medical judgment. Clinician may deviate from the protocol to meet the individual patient's specific condition and health care needs.

**Heparin Protocol for Adult Patients**

**Table 1. Initiation of IV Heparin Infusion **\*\*For ALL Patient Care Areas\*\*****

**LOW Dose Protocol:** acute coronary syndrome, atrial fibrillation, concomitant thrombolytic therapy, peripheral artery diseases, or therapeutic anticoagulation desired but patient is at a high risk of bleeding due to acute condition, previous history of bleeding

<b>Initial Bolus Dose (Optional)</b>	<b>Initial Infusion Dose</b>
60 units/kg - Round to closest 100 units - Maximum bolus dose of 5,000 units - Bolus dose administered over 3 minutes	12 units/kg/hr - Round to closest 50 units/hr - Maximum initial dose 1,000 units/hr - Order defaults to duration of 24 hours

**HIGH Dose Protocol:** DVT, PE, mechanical valve replacement

<b>Initial Bolus Dose (Optional)</b>	<b>Initial Infusion Dose</b>
80 units/kg - Round to closest 100 units - Maximum bolus dose of 10,000 units - Bolus dose administered over 3 minutes	18 units/kg/hr - Round to closest 50 units/hr. - Maximum <u>initial</u> rate of 2,000 units/hr - Order defaults to a duration of 24 hours

**Table 2. Maintenance Dose Adjustments Based on aPTT Results (Target aPTT 60-80 seconds)**  
**\*\*For NON-Intensive Care Units\*\***

<b>aPTT (sec)</b>	<b>Bolus</b>	<b>Maintenance Infusion Dosage Change</b>	<b>Next aPTT After Change</b>
<45	40 units/kg*  <i>*Refer table 3 below for bolus dose adjustment</i>	Increase rate by 3 units/kg/hr	6 hours
45-59	NONE	Increase rate by 2 units/kg/hr	6 hours
60-80 (Goal)	NONE	NO CHANGE	6 hours until therapeutic x 2 consecutive values, then q24h
81-90	NONE	Decrease rate by 3 units/kg/hr	6 hours
> 90	NONE	<b>STOP</b> infusion for 2 hours, Then, decrease rate by 3 units/kg/hr	2 hours after infusion resumed

**Table 3. Bolus Dose Adjustment (40 units/kg) **\*\*For Non-Intensive Care Units\*\*****

<b>Patient Weight (kg)</b>	<b>&lt;60 kg</b>	<b>60-85 kg</b>	<b>85-110 kg</b>	<b>&gt;110 kg</b>
Dose	2,000 units	3,000 units	4,000 units	5,000 units Maximum

**Appendix A: Adult Heparin Protocols at the Downstate Health Sciences University**  
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**Table 4. Maintenance Dose Adjustment Heparin IV Nomogram \*\*For Intensive Care Units\*\***  
**(Target aPTT 60-80 seconds)**

MAINTENANCE IV HEPARIN ORDERS: Adjust IV Dose Based on Subsequent aPTT As Per Table.							
aPTT (sec)	BOLUS (Round to nearest 100 units)	Dosage Change	Dosage Change Based on Weight* (Round Doses to Nearest 50 units/hr.)				NEXT aPTT After Change
			40-59 kg	60-69 kg	70-79 kg	>80 kg	
< 35	60 units/kg = ____ units	+ 3 units/kg/hr	↑ by 150 units/hr	↑ by 200 units/hr	↑ by 250 units/hr	↑ by 300 units/hr	6 hours
35-44	30 units/kg = ____ units	+ 2 units/kg/hr	↑ by 100 units/hr	↑ by 150 units/hr	↑ by 150 units/hr	↑ by 200 units/hr	6 hours
45-59	NONE	+ 2 units/kg/hr	↑ by 100 units/hr	↑ by 150 units/hr	↑ by 150 units/hr	↑ by 200 units/hr	6 hours
60-80 (Goal)	NONE	NO CHANGE	NO CHANGE				12 hours
81-95	NONE	- 2 units/kg/hr	↓ by 100 units/hr	↓ by 150 units/hr	↓ by 150 units/hr	↓ by 200 units/hr	6 hours
> 95	NONE	<b>STOP x 1 hour; Restart at - 3 units/kg/hr</b>	↓ by 150 units/hr	↓ by 200 units/hr	↓ by 250 units/hr	↓ by 300 units/hr	6 hours