## Appendix A: Adult Heparin Protocols at the Downstate Health Sciences University Updated May 2025

## **Heparin Protocol for Adult Patients**

## Table 1. Initiation of IV Heparin Infusion

<u>LOW Dose Protocol</u>: 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

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

HIGH Dose Protocol: DVT, PE, mechanical valve replacement

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

Table 2. Maintenance Dose Adjustments Based on aPTT Results \*\*For Non-Intensive Care Units\*\*

(Target aPTT 60-80 seconds)

aPTT (sec)	Bolus	Maintenance Infusion Dosage Change	Next aPTT After Change	
<45	40 units/kg*  *Refer table 3 below for bolus dose adjustment	Increase rate by 3 units/kg/hr	6 hours	
45-60	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\*\*

Patient Weight (kg)	<60 kg	60-85 kg	85-110 kg	>110 kg	
Dose	2,000 units	3,000 units	4,000 units	5,000 units Maximum	

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Table 4. Maintenance Dose Adjustment Heparin IV Nomogram \*\*For Intensive Care Units\*\*

(Target aPTT 55-80 seconds)

aPTT	BOLUS (Round to	Dosage Change	Dosage Change Based on Weight* (Round Doses to Nearest 50 units/hr.)			NEXT aPTT After	
(sec)	nearest 100 units)	Dosage Change	40-59 kg	60-69 kg	70-79 kg	>80 kg	Change
< 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
45-54	NONE	+ 2 units/kg/hr	↑ by 100 units/hr	↑ by 150 units/hr	↑ by 150 units/hr	↑ by 200 units/hr	6 hours
55-80 (Goal)	NONE	NO CHANGE	NO CHANGE			24 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	STOP x 1 hour; Restart at - 3 units/kg/hr	↓ by 150 units/hr	↓ by 200 units/hr	↓ by 250 units/hr	↓ by 300 units/hr	6 hours