

## SRFT protocol for treatment of anticoagulant-associated ICH

### 1 Anticoagulant-associated ICH is an emergency

- **Rapid recognition:** Always ask about anticoagulants in patients with acute stroke symptoms *regardless of onset time*
- **Urgent scanning:** Arrange urgent CT brain scan at next available slot
- **ICH on scan:** initiate immediate treatment

#### Anticoagulants

#### **Vit K antagonists:**

warfarin, sinthrome

**DOACs:** apixaban, dabigatran, rivo-roxaban, edoxaban

### 2 VKA-ICH—give Beriplex and Vitamin K

1. **Check point-of-care INR** using Roche Coaguchek device (plus lab INR for audit only)
2. **Dose Beriplex** based on patient weight and point-of-care INR (see table below)
3. **Prescribe Beriplex** on transfusion prescription sheet—complete a separate line for each bottle
4. **Collect Beriplex** from transfusion fridge in blood gas room near ED resus
5. **Draw up Beriplex** and then administer at 8 ml/min
6. **Give Vitamin K** at 10 mg IV once Beriplex has commenced

#### Beriplex quick dosing guide

	Dosing	30 kg	40 kg	50 kg	60 kg	70 kg	80 kg	90 kg	100+
<b>INR 1.3-3.9</b>	25 IU/kg	750	1000	1250	1500	1750	2000	2250	2500
<b>INR 4.0-6.0</b>	35 IU/kg	1050	1400	1750	2100	2450	2800	3150	3500
<b>INR &gt; 6</b>	50 IU/kg	1500	2000	2500	3000	3500	4000	4500	5000

**Treat as quickly as possible—target door-to-needle time < 90 min**

### 3 Replace ED stock of Beriplex after use

1. **Complete manila tags** attached to each used bottle of Beriplex
2. **Complete blood transfusion request form**
3. Take all **unused ED Beriplex stock, completed tags, transfusion prescription and transfusion request form** to Blood Bank, calling ahead so replacement stock can be prepared
4. **Return with new ED stock** and place in ED transfusion fridge

#### **Blood Transfusion**

Mon-Fri, 9:00-17:30:

Tel: 64994

Out-of-hours:

Bleep: 3077

**Do NOT forget—this is vital for traceability of blood products**

### 4 Recheck INR after treatment

1. Repeat INR 30 min and 6 h after end of infusion of Beriplex (laboratory INR, not point-of -care)
2. If repeat INR > 1.2, seek haematology advice on further management

### 5 ICH on DOACs (dabigatran, apixaban, rivaroxaban, edoxaban)

1. Send urgent coagulation screen, thrombin time (dabigatran only) and anti-Xa assay (apixaban, rivo-roxaban, edoxaban)
2. Contact haematology on call registrar (07623625698 or 07623615092); via switch out-of-hours