



Cross this box to mark this order as **STAT**

## WEIGHT-BASED HEPARIN ORDERS

Weight \_\_\_\_\_ kg (2.2 lb = 1 kg)

Allergies ☐ NKDA

☐ Other \_\_\_\_\_

### • LABORATORY

- Check baseline aPTT, PT, INR, CBC with platelets, then daily.
- Check aPTT Q6H after the initiation of infusion and after each dosage. When two consecutive aPTT values are in the therapeutic range, then check aPTT daily.
- Test all stools for occult blood
- No IM injections while on heparin. Notify physician immediately in the event of significant bleeding.
- *If heparin therapy is interrupted for a procedure, a restart order from the physician is needed to resume the infusion.*
- Discontinue low molecular weight heparin (i.e., enoxaparin)
- Start heparin infusion (heparin 25,000 units in 250 ml D5W. Concentration = 100 units/ml).
- Titrate heparin infusion according to the selected table.

### ☐ Non-Cardiac

Initial Bolus	80 units X Weight (kg) = _____ units IV bolus
Initial infusion rate of 18 units/kg/hour	18 units/kg/hour X Weight (kg) = _____ units/hour (divide by concentration to get ml/hour)
aPTT below 35 seconds (aPTT < 1.2 x control)	80 units/kg bolus; increase infusion rate by 4 units/kg/hour
aPTT 35 to 45 seconds (aPTT 1.2 to 1.5 x control)	40 units/kg bolus; increase infusion rate by 2 units/kg/hour
aPTT 46 to 70 seconds (aPTT 1.5 to 2.3 x control)	Therapeutic, no change
aPTT 71 to 90 seconds (aPTT 2.3 to 3 x control)	Reduce infusion rate by 2 units/kg/hour
aPTT above 90 seconds (aPTT 3 x control)	Hold heparin for one hour. Reduce infusion rate by 3 units/kg/hour

### ☐ Cardiac

Initial Bolus	60 units X Weight (kg) = _____ units IV bolus (Recommended maximum dose in patients > 70 kg is 4000 units)
Initial infusion rate of 12 units/kg/hour	12 units/kg/hour X Weight (kg) = _____ units/hour (divide by concentration to get ml/hour) (Recommended maximum rate in patients > 70 kg is 1000 units/hr)
aPTT below 35 seconds (aPTT < 1.2 x control)	60 units/kg bolus; Increase infusion rate by 4 units/kg/hour
aPTT 35 to 45 seconds (aPTT 1.2 to 1.5 x control)	40 units/kg bolus; Increase infusion rate by 2 units/kg/hour
aPTT 46 to 70 seconds (aPTT 1.5 to 2.3 x control)	Therapeutic, no change
aPTT 71 to 90 seconds (aPTT 2.3 to 3 x control)	Reduce infusion rate by 2 units/kg/hour
aPTT above 90 seconds (aPTT 3 x control)	Hold heparin for one hour. Reduce infusion rate by 3 units/kg/hour

Physician's Signature \_\_\_\_\_

ID Number \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

RN's Signature \_\_\_\_\_

Date/Time \_\_\_\_\_

Unit Secretary's Signature \_\_\_\_\_

Date/Time \_\_\_\_\_



W601205



**Washington  
Adventist  
Hospital**  
**WEIGHT-BASED HEPARIN  
ORDERS**

601-205 (02/09)

PATIENT LABEL