

****FOR INTENSIVE CARE USE ONLY ****
Adult ARGATROBAN Infusion Chart for ALL ECMO

Consultant		Name of Patient	
Hospital / Ward		CHI Number	
Weight (kg)		DOB	

Medicine (Approved Name)	Final Concentration	Total Dose	Volume	Route	Prescribed / Transcribed By Sign & print name
Argatroban	0.5mg/ml	25mg	50mls	IV	

If in doubt, contact pharmacy for advice.

Initiation of therapy
<ul style="list-style-type: none"> Check baseline FBC, coagulation screen, urea, creatinine Prescribe continuous infusion on the patient main prescription chart. No loading dose is given. Start continuous infusion of argatroban 12 mcg /kg/hour (maximum 1500 mcg/hour). Use actual body weight capped at 125kg. For patients with a high risk of thrombosis (eg circuit thrombosis/PE) consider a higher starting rate e.g 30 mcg /kg/hour (maximum 1500 mcg/hour)

Infusion Rate Instructions							
	Date	Time	Rate ml/hr	Prescribed by	Adjusted by	APTT ratio	Reason for Change/Comment
Initial Rate							
Change 1							
Change 2							
Change 3							
Change 4							
Change 5							
Change 6							

Dose Adjustment Instructions		
TARGET: APTTR 1.5 to 2.0		
Anti-Xa level	INFUSION ADJUSTMENT:	REPEAT APTTr:
>3.1	Stop for 2 hours decrease rate by 50%	2 hours
2.1-3.0	Stop for 1 hour and decrease rate by 3mcg/kg/hour	2 hours
1.5-2.0	No change in infusion rate	6 hours
<1.4	Increase infusion rate by rate by 3mcg/kg/hour	2 hour

Other Instructions
<ul style="list-style-type: none"> Needs to be administered through a dedicated central line lumen Check initial APTTr, 6 hours after initiation, then adjust rate to achieve therapeutic range of 1.5-2.0 using the dose adjustment table above. Monitor FBC daily and be vigilant for worsening hepatic function as argatroban is predominantly hepatic metabolised If therapeutic range for argatroban is not reached within 24 hours, seek advice from haematology Do <u>not</u> take the APTTr sample from the limb with the infusion (or the same line in the case of central lines) No loading dose is required A suggested starting dose for patients who are low risk for thrombosis is 12 microgram/kg/hour intravenously Doses of 30 microgram/kg/hour or more may be used for patients with known or suspected thrombosis.
Preparation of Argatroban <ul style="list-style-type: none"> First prepare a 250mg in 250ml infusion. The solution for infusion may be 5% glucose (preferred) or 0.9% Sodium chloride The bag should be mixed by repeated inversion of the diluent bag for one minute. When thoroughly mixed remove 25mL (25mg) from this bag into a 50mL syringe and further dilute to 50mL with 5% glucose (or other diluent as above) and mix thoroughly to make a concentration of 500mcg/mL

