

Protocol for anticoagulant reversal in ICH (centres with Octaplex & POC INR)

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

ICH on DOACs

- **Send urgent coagulation tests:**
 Apixaban, rivaroxaban, edoxaban — PT, aPTT, and anti-Xa assay (if available)
 Dabigatran — PT, aPTT, thrombin time
- **Time since last dose of DOAC:**
 ≤ 24 h — treat without discussion with haematology
 > 24 h — contact haematology on-call for advice
- **Anti-Xa agents (apixaban rivaroxaban, edoxaban):**
 Dose Octaplex at 50 IU/kg
 Prescribe Octaplex on transfusion prescription sheet—separate line for each bottle
Maximum dose 3000 IU
 Administer Octaplex at 1ml/min
- **Dabigatran:** administer idarucizumab (Praxbind) (2x2.5 g/50 ml) IV as two consecutive infusions over 5 to 10 min each or as a bolus injection

ICH on VKA (warfarin, Synthrome)

1. **Check point of care INR**—(plus lab INR)
2. **Dose Octaplex** based on point of care INR (as per table below)
3. **Administer Octaplex** at 1ml/min
4. **Give Vitamin K** 10 mg IV as soon as possible once Octaplex commenced
5. **Repeat INR 30 min and 6 h** after end of infusion of Octaplex
6. If repeat INR > 1.2, seek haematology advice on further management

Octaplex quick dosing guide

| | Dosing | 30 kg | 40 kg | 50 kg | 60 kg | 70 kg | 80 kg | 90 kg | 100+ |
|--------------------|-----------------|-------|-------|-------|-------|-------|-------|-------|------|
| INR 1.3-3.9 | <i>25 IU/kg</i> | 750 | 1000 | 1250 | 1500 | 1750 | 2000 | 2250 | 2500 |
| INR 4.0-6.0 | <i>35 IU/kg</i> | 1050 | 1400 | 1750 | 2100 | 2450 | 2800 | 3000 | 3000 |
| INR > 6 | <i>50 IU/kg</i> | 1500 | 2000 | 2500 | 3000 | 3000 | 3000 | 3000 | 3000 |

Octaplex is a blood product, every bottle must be traceable and needs to be prescribed separately
 If using emergency Octaplex stock, send usual request to haematology so this can be replaced