VCMC Guideline for the Reversal of Warfarin and Antiplatelet Associated Traumatic Brain Injury, Spontaneous Intracranial Bleeding, and other Critical Bleeding in Adults

The contents of this clinical practice guideline are to be used as a guide. Healthcare professionals should use sound clinical judgment and individualize patient care. This CPG is not meant to be a replacement for training, experience, CME or studying the latest literature and drug information.

Intracranial hemorrhage or other critical bleeding (MUST BE CRITICAL BLEEDING)

Draw INR, PT, aPTT, fibrinogen, D-Dimer, CBCD, Type and Cross, along with other labs as dictated by presentation

Known Warfarin Use or INR 1.6 to 3.9

Give the following products (even before lab results known):
1. KCentra 25 Units/kg IV at 0.12 mL/kg/min† (MAX dose 2500 Units)
2. Vitamin K 10 mg IV over 20-60 minutes (must specify exact time)

INR 4 - 5.9:
Give an additional KCentra 10 Units/kg @ 0.12 mL/kg/min† (for a total dose 35 Units/kg) (MAX total dose 3500 Units)

INR ≥ 6:
Give an additional KCentra 25 Units/kg @ 0.12 mL/kg/min† (for a total dose 50 Units/kg) (MAX total dose 5000 Units)

Initial INR 4-5.9

Give the following products:
1. KCentra 35 Units/kg @ 0.12 mL/kg/min† (for a total dose 35 Units/kg) (MAX dose 3500 Units total)
2. Vitamin K 10 mg IV over 20-60 minutes (must specify exact time)

Initial INR ≥ 6

Give the following products:
1. Give KCentra 50 Units/kg @ 0.12 mL/kg/min† (for a total dose 50 Units/kg) (MAX dose 5000 Units)
2. Vitamin K 10 mg IV over 20-60 minutes (must specify exact time)

Known Antiplatelet Use (i.e. Aspirin, Plavix) regardless of platelet count

For Aspirin Use:
• Give 1 Unit platelets x 1

For Plavix Use:
• Give 2 Units platelets x 1 Stat, then
• Give 1 Unit platelets daily x 4 days

†: Rate of Kcentra at maximum is 8.4 ml/minute (210 Units/ minute)

NOTE: Redosing is NOT recommended


Approval: Med 7/14, MEC 8/14