

UAB MUSCULOSKELETAL IMAGING SECTION - GUIDELINES FOR TESTING AND MANAGEMENT OF LAB VALUES FOR MUSCULOSKELETAL PROCEDURES

PROCEDURES WITH LOW RISK OF BLEEDING, EASILY DETECTED AND EASILY CONTROLLABLE:		
LOW Risk Procedures	Lab Tests	Management
<ul style="list-style-type: none"> Extremity Joint Injections and Aspirations (except Hip) Selective Nerve Root Block Sacroiliac Joint Injection. Bone Marrow Biopsy Superficial bone or soft tissue biopsy Spine procedures (facet injections, synovial cyst ruptures.) 	<p>INR: Routinely recommended for patients receiving Coumadin anticoagulation or with known or suspected liver disease</p> <p>Platelet count: Not routinely recommended</p>	<p>INR: Correct to a range 2.0-3.0 . FFP, vitamin K (5-10 mg PO in adults)</p> <p>PTT: Assess individually</p> <p>Platelets: Assess individually</p> <p>Low-molecular-weight heparin (Lovenox, Fragmin): Do not withhold.</p> <p>IV Heparin: Do not withhold.</p> <p>Do not withhold: Aspirin, Pradaxa, Savaysa. Xarelto., Eliquis: Plavix: Brilinta, Effient, Kengreal, Arixtra, Acova, Angiomax, Bevyxxa, Pletal</p>
PROCEDURES WITH HIGH RISK OF BLEEDING:		
HIGH Risk Procedures	Lab Tests	Management
<ul style="list-style-type: none"> Spine procedures (kyphoplasty, vertebroplasty, biopsy, lumbar puncture, epidural injection) Low risk Microwave, Cryoablation or Radiofrequency ablation. Deep Soft Tissue or Bone Biopsy. Hip Injections/Aspirations 	<p>INR: Recommended</p> <p>Platelet count: Recommended</p>	<p>INR: Correct to a range 1.5-1.8 FFP, vitamin K (5-10 mg PO in adults)</p> <p>PTT: Stop heparin</p> <p>Platelets: Transfusion recommended for counts <50,000/uL</p> <p>Low-molecular-weight heparin (prophylactic or therapeutic dose): Withhold 1 dose if prophylactic; dose; 2 doses or 24hrs before procedure if therapeutic dose.</p> <p>IV Heparin: Withhold 4-6 hours before procedure; check aPTT</p> <p>Aspirin:Do not withhold aspirin</p> <p>Pradaxa: Withhold 4 doses (eGFR≥50) or 6-8 doses (eGFR < 30-50).</p> <p>Savaysa: Withhold for 2 doses.</p> <p>Xarelto: Defer procedure until off medication for 2 doses (eGFR ≥50), 2 doses (eGFR < 30-50), or 3 doses (eGFR < 15-30).</p> <p>Eliquis: Withhold 4 doses (eGFR ≥ 50) or 6 doses (eGFR < 30-50)</p> <p>Plavix: Withhold for 5 days before procedure.</p> <p>Brilinta: Withhold for 5 days before procedure.</p> <p>Effient: Withhold for 7 days before procedure.</p> <p>Kengreal: Defer procedure until off medication.</p> <p>Arixtra: Withhold 2-3 days (eGFR ≥50) or 3-5 days (eGFR≤ 50)</p> <p>Acova: Withhold 2-4 hours before procedure. Check aPTT</p> <p>Angiomax: Withhold 2-4 hours before procedure. Check aPTT</p> <p>Coumadin: Withhold 5 days until target INR ≤ 1.8</p> <p>Bevyxxa: Withhold for 3 doses.</p> <p>Pletal: Do not withhold.</p>

Adapted from Society of Interventional Radiology Consensus Guidelines for the Periprocedural Management of Thrombotic and Bleeding Risk in Patients Undergoing Percutaneous Image-Guided Interventions—Part II: Recommendations *J Vasc Interv Radiol* 2019; 30:1168-1184

These are suggested practice guidelines developed by UAB Radiology for use by UAB Radiology. These guidelines are intended to be used in conjunction with a provider’s training and expertise, as appropriate for the specific assessment and care needs of the individual patient. These practice guidelines are not necessarily inclusive of all proper methods of care, nor exclusive of other reasonable methods of care. These guidelines are based on relevant portions of various peer reviewed publications and the knowledge and expertise of UAB Radiology Medical Staff Members. These guidelines represent a consensus among UAB Radiology providers to facilitate a consistent, high-quality practice in anticoagulation therapy related to Radiology procedures.