

# EmergencyKT: Bleeding Patient – Dabigatran (Pradaxa)

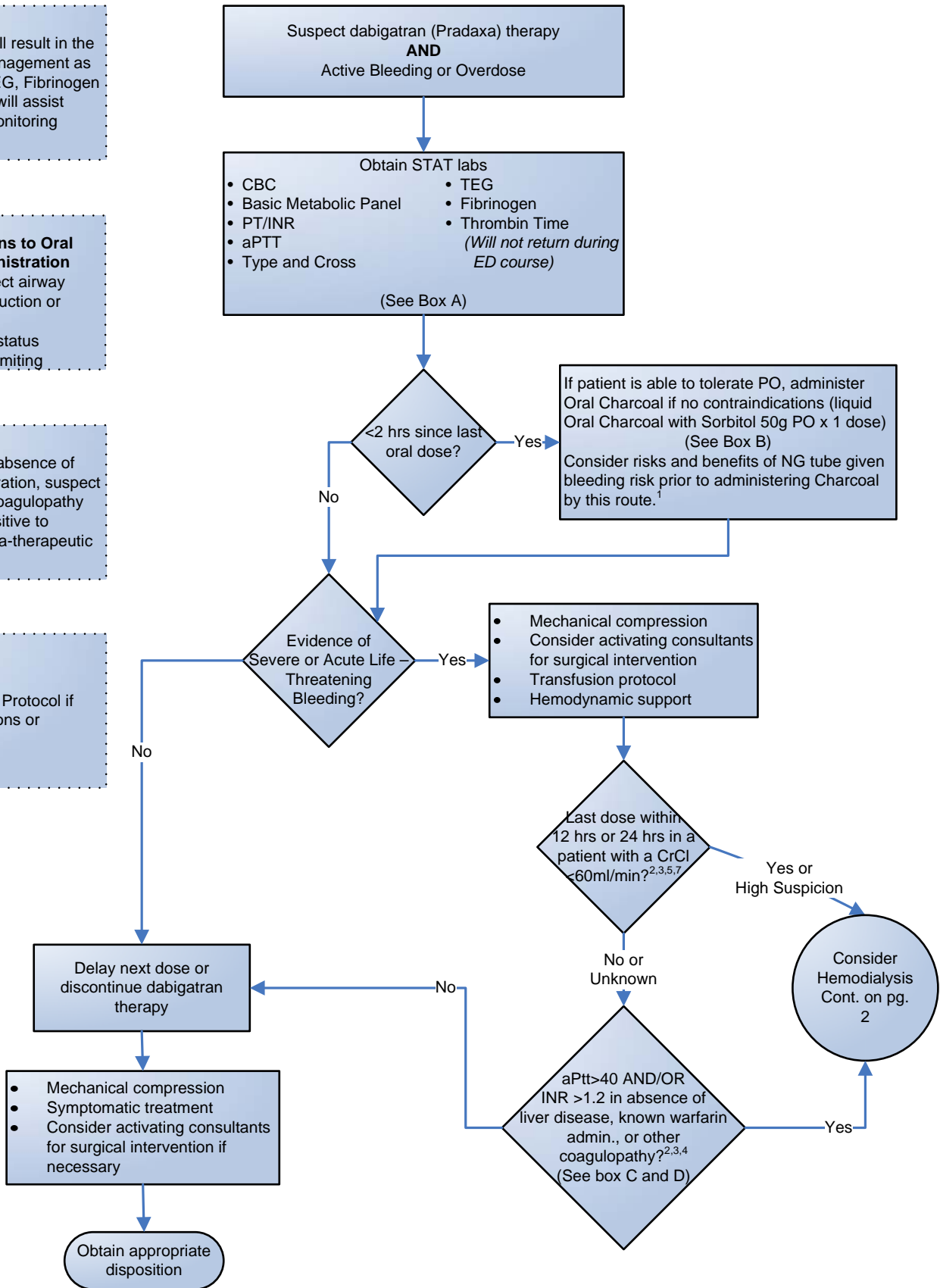
**Box A**  
PT/INR and aPTT will result in the ED to help guide management as described below. TEG, Fibrinogen and Thrombin Time will assist inpatient teams in monitoring anticoagulation

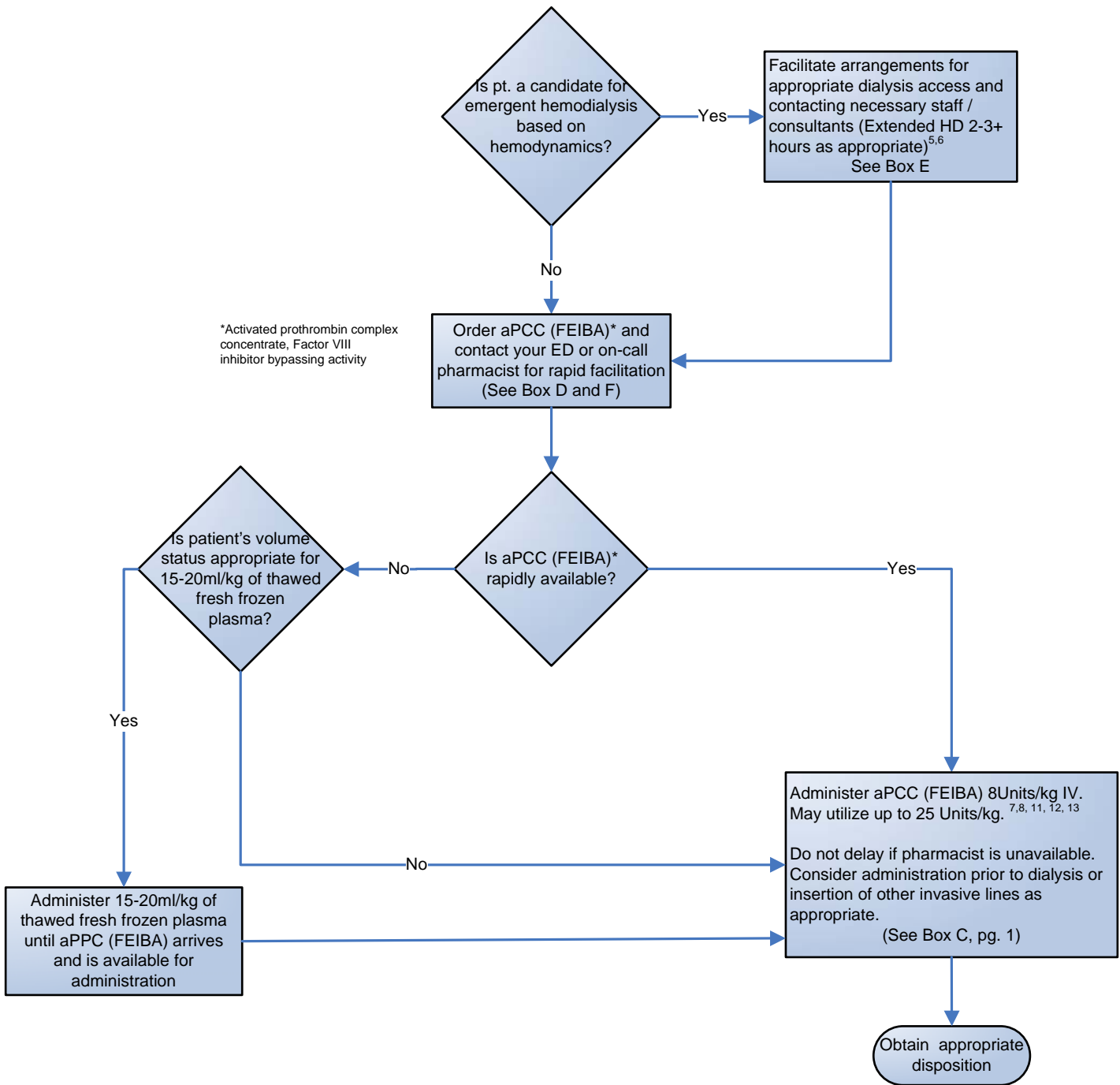
**Box B**  
**Contraindications to Oral Charcoal Administration**

- Inability to protect airway
- Known GI obstruction or alteration
- Altered mental status
- Uncontrolled vomiting

**Box C**  
If INR is elevated in absence of significant aPTT elevation, suspect another reason for coagulopathy as aPTT is very sensitive to therapeutic and supra-therapeutic levels of dabigatran.

**Box D**  
See UC Health PCC Protocol if you have any questions or concerns





\*Activated prothrombin complex concentrate, Factor VIII inhibitor bypassing activity

**Box E**  
 Consider CRRT if available as case studies suggest rebound elevated Dabigatran levels after discontinuation of HD due to the wide volume of distribution of dabigatran.

**Box F**  
 If none available in ED, contact on call Pharmacist at 513-343-5412. If unable to reach, contact Chris Droege at 513-230-2246

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