Anticoagulant reversal - rivaroxaban (Xarelto) or apixaban (Eliquis)

Suspect rivaroxaban (Xarelto) or apixaban (Eliquis) therapy AND Active Bleeding

Obtain STAT labs
- CBC
- BMP
- Anti-Xa
- TEG
- PT/INR
- Type and Cross
- POC INR

Delay next dose or discontinue rivaroxaban or apixaban therapy

Evidence of severe or acute life-threatening bleeding?
- Yes
  - Consider activating consultants for surgical intervention
  - Mechanical compression
  - Transfusion protocol
  - Hemodynamic support

No

Symptomatic treatment
- Consider activating consult for surgical intervention if necessary

Rivaroxaban
Last dose within 12 hours or 24 hours in a patient with CCl <50 mL/min

Apixaban
Last dose within 12 hours or 24 hours in a patient with Scr >1.5 mg/dL

Laboratory result of at least ONE of the following:
- PT > 16 seconds
- Anti-Xa > 0.5 units/mL

Delay next dose or discontinue apixaban or rivaroxaban therapy

No

Yes

Intracranial hemorrhage, life-threatening bleed at a critical site or major bleed with hemodynamic instability?
- No
  - Give FFP
  - Administer inactivated-activated (Andexa)

- Yes
  - Last dose taken ≥ 8 hours OR
  - Last dose ≤ 8 hours/unknown and dose ≤10 mg rivaroxaban or ≤5 mg apixaban
    - 400 mg IV bolus administered at a rate of ~30 mg/minute, followed within 120 minutes by an IV infusion of 4 mg/minute for up to 120 minutes
  - Last dose <8 hours/unknown AND >10 mg rivaroxaban and >5 mg apixaban
    - 800 mg IV bolus administered at a rate of ~30 mg/minute, followed within 2 minutes by an IV infusion of 8 mg/minute for up to 120 minutes

Symptomatic treatment

See UC Health Guideline for the Use of Reversal Agent and Factor Products in Acute Bleeding or Trauma (http://www.ucfoundation.org/Departments/Pharmacy/OoPPGGuidelines.pdf) if you have questions or concerns.