

Management of Periprocedural Anticoagulation (Electrophysiology)

Electrophysiology Procedure Anticoagulation and Antiplatelet Recommendations						
		New Implants (PPM, ICD, CRT)	Generator Changes	Extractions	Epicardial, Left-sided VT and PVC Ablation	Atrial Fibrillation/Flutter Ablation
DFTs		Therapeutic anticoagulation for 3 consecutive weeks (or TEE) in presence of atrial arrhythmia	Not indicated unless specified by EP MD	N/A	N/A	N/A
CHADS ₂ score 5-6 HCM prior stroke off a/c mechanical mitral or tricuspid valve stroke < 6 months prior to procedure		Talk with EP MD regarding anticoagulation recommendation	Talk with EP MD regarding anticoagulation recommendation	Talk with EP MD regarding anticoagulation recommendation	Talk with EP MD regarding anticoagulation recommendation	Talk with EP MD regarding anticoagulation recommendation
warfarin	Pre-procedure (CHADS ₂ score ≤ 4)	Hold 2 days prior to procedure, unless DFTs indicated and/or patient with atrial arrhythmia.	Hold 2 days prior to procedure, unless DFTs indicated and/or patient with atrial arrhythmia. Procedure goal INR 2-2.5	Goal INR ≤ 1.6 for procedure	Goal INR ≤ 1.6 for procedure	Goal INR 2-2.5 for 3 weeks prior to procedure
	Post-procedure	Restart the evening of the procedure	Restart the evening of the procedure	Restart the evening of the procedure	Restart the evening post procedure, minimum of 8 weeks	Restart the evening post procedure, minimum of 8 weeks
	TEE (pre-procedure)	N/A	N/A	N/A	If INR subtherapeutic any time in 3 weeks prior to procedure and patient in atrial fibrillation on the day of the procedure.	If INR subtherapeutic any time in 3 weeks prior to procedure and patient in atrial fibrillation on the day of the procedure. Timing: day prior or morning of or intra-procedure.
enoxaparin (Lovenox, SQ) heparin (IV)	Pre-procedure	No heparin products (IV or SQ) for 6 hours prior to procedure	No heparin products (IV or SQ) for 6 hours prior to procedure	No heparin products (IV or SQ) for 6 hours prior to procedure	No heparin products (IV or SQ) for 4 hours prior to procedure	No heparin products (IV or SQ) for 4 hours prior to procedure
	Post-procedure (CHADS ₂ score ≤ 4)	No heparin products (IV or SQ) indicated for patients with CHADS ₂ score ≤ 4	No heparin products (IV or SQ) indicated for patients with CHADS ₂ score ≤ 4	No heparin products (IV or SQ) indicated for patients with CHADS ₂ score ≤ 4	Restart (without bolus if IV). Timing per EP MD recommendation	Restart (without bolus if IV). Timing per EP MD recommendation
	Post-procedure (CHADS ₂ score > 4)	Restart (without bolus if IV). Timing per EP MD recommendation	Restart (without bolus if IV). Timing per EP MD recommendation	Restart (without bolus if IV). Timing per EP MD recommendation	Restart. Timing per EP MD recommendation	Restart. Timing per EP MD recommendation
	TEE (pre-procedure)	N/A	N/A	N/A	N/A	If INR subtherapeutic any time in 3 weeks prior to procedure and patient in atrial fibrillation on the day of the procedure. Timing: day prior or morning of or intra-procedure.

Management of Periprocedural Anticoagulation (Electrophysiology, *continued*)

Electrophysiology Procedure Anticoagulation and Antiplatelet Recommendations						
		New Implants (PPM, ICD, CRT)	Generator Changes	Extractions	Epicardial, Left-sided VT and PVC Ablation	Atrial Fibrillation/ Flutter Ablation
edoxaban (Savaysa) rivaroxaban (Xarelto)	Pre-procedure (CHADS ₂ score ≤ 4)	Hold for 1 dose prior to the procedure (evening prior to procedure vs morning of procedure depending on patient's regimen)	Hold for 1 dose prior to the procedure (evening prior to procedure vs morning of procedure depending on patient's regimen)	Hold for 1 dose prior to the procedure (evening prior to procedure vs morning of procedure depending on patient's regimen)	Hold for 1 dose prior to the procedure (evening prior to procedure vs morning of procedure depending on patient's regimen)	Hold for 1 dose prior to the procedure (evening prior to procedure vs morning of procedure depending on patient's regimen)
	Post-procedure	Restart with evening dose	Restart with evening dose	Restart with evening dose 48 hours post procedure	Restart the evening post procedure, minimum of 8 weeks	Restart the evening post procedure, minimum of 8 weeks
	TEE (pre- or intra-procedure)	N/A	N/A	N/A	Day prior to, or morning of, or intra-procedure if patient in atrial fibrillation/flutter on the day of the scheduled ablation	Day prior to, or morning of, or intra-procedure if patient in atrial fibrillation/flutter on the day of the scheduled ablation
apixaban (Eliquis) dabigatran (Pradaxa)	Pre-procedure (CHADS ₂ score ≤ 4)	Hold dose the evening prior and morning of procedure	Hold dose the evening prior and morning of procedure	Hold for 3 doses prior to the procedure (both doses day prior to procedure and dose the morning of procedure)	Hold dose the morning of procedure	Hold dose the morning of procedure
	Post-procedure	Restart with evening dose	Restart with evening dose	Restart with evening dose 48 hours post procedure	Restart the evening post procedure, minimum of 8 weeks	Restart the evening post procedure, minimum of 8 weeks
	TEE (pre or intra-procedure)	N/A	N/A	N/A	Day prior or morning of or intra-procedure if patient in atrial fibrillation/flutter on the day of the scheduled ablation	Day prior or morning of or intra-procedure if patient in atrial fibrillation/flutter on the day of the scheduled ablation
aspirin clopidogrel (Plavix) prasugrel (Effient) ticagrelor (Brilinta)	Pre-procedure (CHADS ₂ score ≤ 4) PCI/CABG > 12 months	Hold for 5 days	Hold for 5 days	Hold for 5 days	uninterrupted	uninterrupted
	Post-procedure	Restart on 5th day post procedure	Restart on 5th day post procedure	Restart on 5th day post procedure	Restart evening after procedure	Restart evening after procedure
	Stent < 6 months	uninterrupted	uninterrupted	uninterrupted	uninterrupted	uninterrupted
	Stent 6-12 months	single agent	single agent	single agent	single agent	single agent