

# Adult Anticoagulant Lab Algorithm



Patient is on a continuous anticoagulant infusion

What is the patient's access?

NO

Can accurate coagulation labs be drawn via venipuncture?

YES

Use venipuncture to draw APTT, PT and INR

Collect distal to anticoagulant infusion site, opposite arm preferred<sup>1</sup>

Discard initial sample (air in extension set prevents correct ratio of blood to anticoagulant additive in tube)<sup>10</sup>

Follow Lippincott Procedure "Venipuncture" to draw labs

**\*\*\*Coagulation labs (APTT, PT, INR) should not be drawn off of lines or lumens with anticoagulation infusing\*\*\*<sup>2</sup>**

Peripheral Line

Identify dedicated line for labs<sup>3</sup>

Ensure sample is **not** drawn from line previously used for anticoagulant<sup>3</sup>

Collect distal to anticoagulant infusion site, opposite arm preferred<sup>1</sup>

**Pause** infusion for 1 to 2 mins prior sampling<sup>10</sup>

Flushing line prior to sampling is not necessary

Follow Lippincott procedure "IV Catheter Blood Sampling" to draw labs

Central Access Device (PICC, Triple lumen, Trialysis, portacath)

Identify dedicated line for labs<sup>3</sup>

Ensure sample is **not** drawn from port previously used for anticoagulant<sup>3</sup>

**Pause** anticoagulant infusion for **10 mins** prior to sampling<sup>10</sup>

If possible and appropriate pause any other infusing medications or fluids including those running through another lumen

Flush with 10ml of 0.9% sodium chloride<sup>1</sup>

Waste 10mL of blood and discard appropriately<sup>4</sup> (do not use push pull method)<sup>2</sup>

Follow Lippincott procedure "Central Venous Access Catheter Blood Sampling" to draw labs