NORTHWEST Kidney Centers

In-Center Hemodialysis Standing Orders – Heparin Protocol

Heparin ICD 10 code: N18.6, End-Stage Renal Disease

Purpose: To provide optimal management of anticoagulation for in-center hemodialysis patients through the use of heparin.

Heparin Dosing: By bolus. Initial Heparin dose per physician order.

1. Maximum initial bolus 8000 Units.
2. Doses higher than 8000 Units require CMO approval.
3. Physician requests for hourly heparin dosing require CMO approval.

Heparin Dosing Adjustment:

Do not change the heparin dose more frequently than every 1 week unless:

a. Ordered by a physician – or -
b. There is a clinical indication to stop heparin, including but not limited to an allergic reaction, recent trauma, or prolonged bleeding, as defined below. Nurse can make this determination.

1. Increase heparin by a 500 Unit bolus for clotting.
   Clotting is defined as:

A.	Shadows or black streaks in dialyzer
B.	Clot formation in drip chambers, venous trap, or arterial side header
C.	Clots noted at other sections of dialysis tubing during rinseback
D.	Extremely dark blood

2. Decrease heparin by 500 Units for prolonged bleeding.
   Prolonged bleeding is defined as bleeding for greater than 10 minutes after the end of the hemodialysis treatment.
3. If there is evidence of fall, bruising, same day surgery, or dental visit, notify MD by fax and decrease initial bolus by 50%. If active bleeding is present, such as epistaxis, vaginal bleeding, or if patient is diagnosed with suspected pericarditis, hold heparin and notify MD by phone.

_____ _____
Physician Name (Please Print) RN Name (Please Print)

_____ _____ _____
Physician signature RN signature Date

Patient Name_____ **NKC#**_____