

Case 1

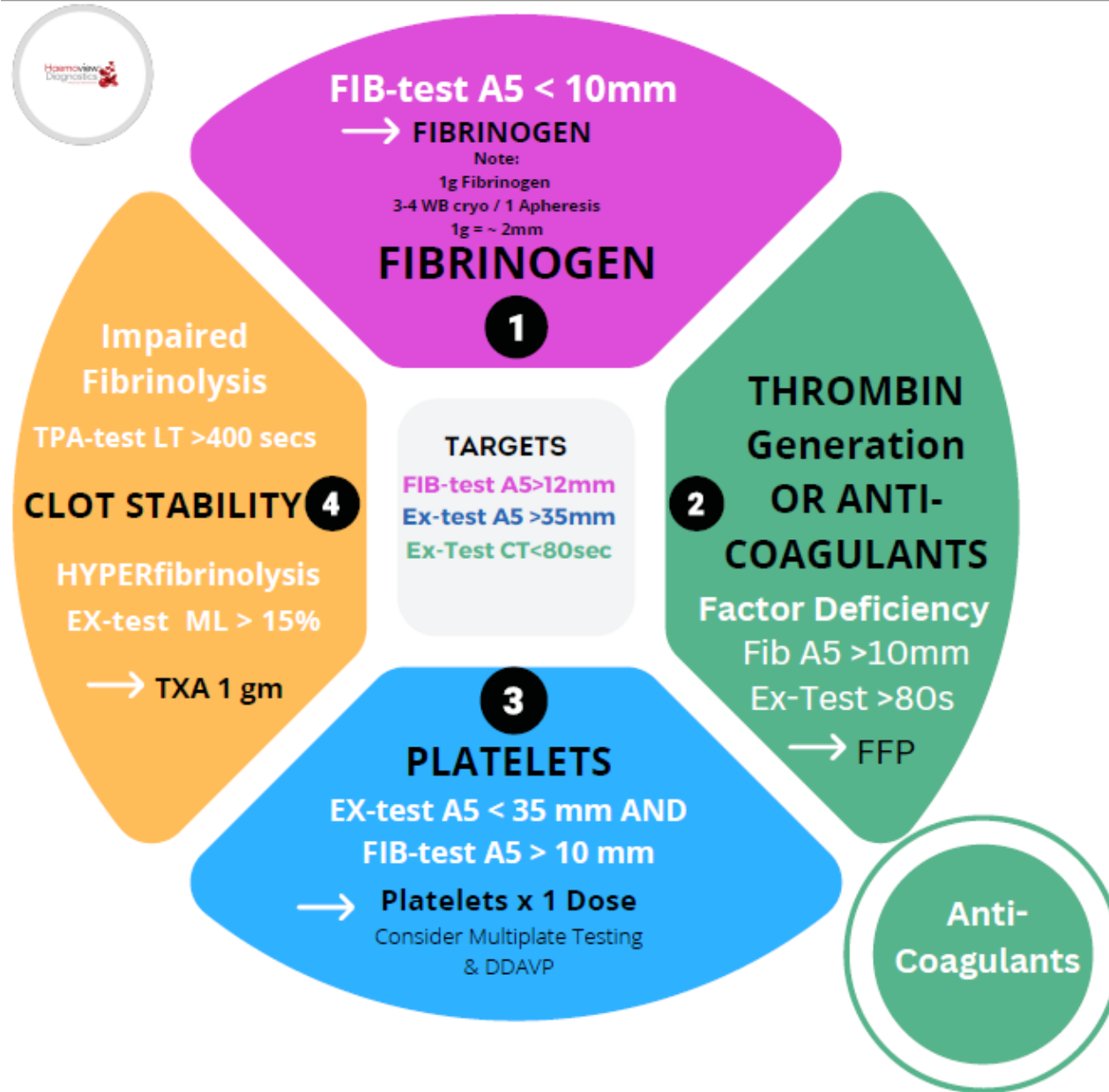
Thanks to Haemoview Diagnostics for supplying this educational material and these cases.

Try to interpret these cases first yourself using your knowledge and the Clotpro algorithm.

Disclaimer: These cases are provided for educational purposes only, they do not constitute medical advice. You should follow your local institutional policies and use your own clinical judgement.



Only treat abnormal value if **SIGNIFICANT BLEEDING** is present.



- RVV Test**
 - Fxa Inhibitors/ LMWH**
 - CT >100s ~50ng/ml
 - CT 100-150s- DOAC EFFECT
 - CT >150s RELEVANT effect- reversal indicated
- ECA Test**
 - Direct Thrombin Inhibitors**
 - CT >180s
 - Dabigatan > 50ng/ml
- IN-Test**
 - Heparin Effect**
 - IN-test CT > 190s and
 - $\frac{IN-test\ CT}{HI-test\ CT}$ ratio ≥ 1.25
- Hi-Test**
 - Protamine**
 - IN-test AND HI-test
 - CT > 240 s

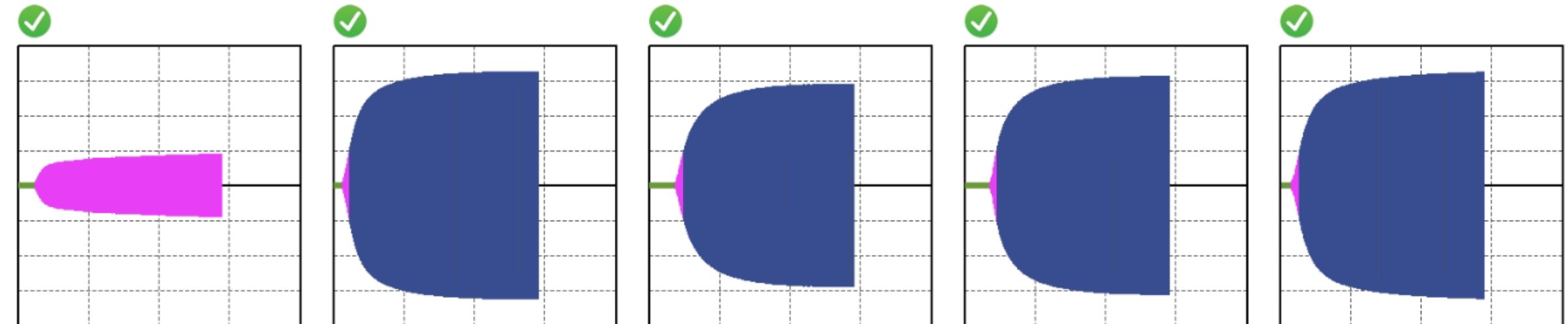
Physiological Targets

- T° > 36
- pH > 7.2
- iCa > 1mmol/L

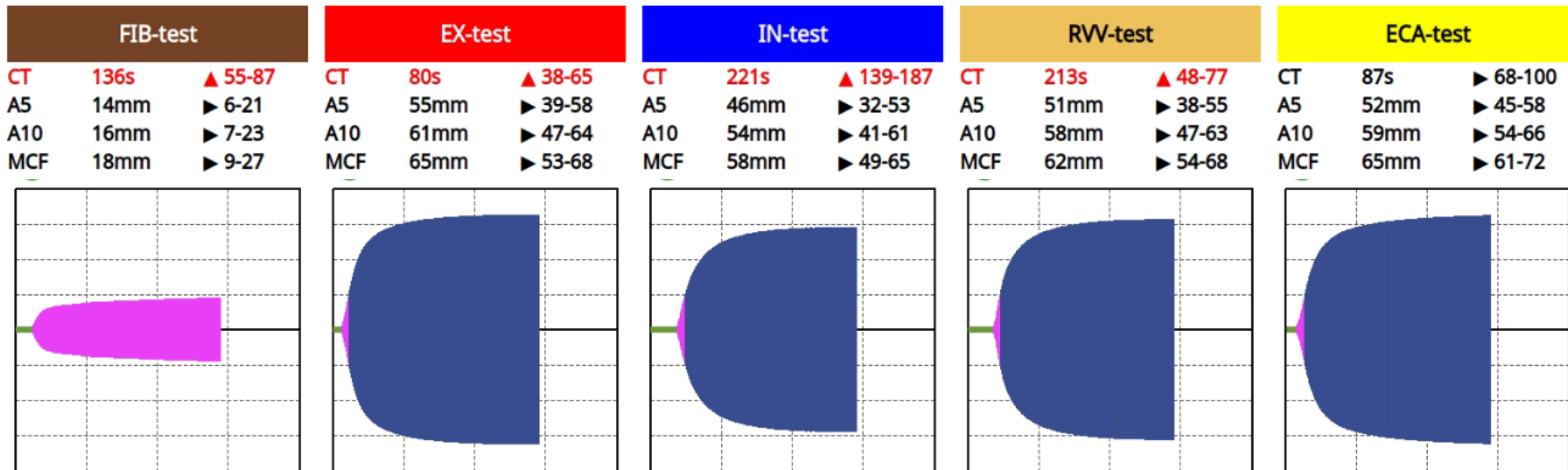
- 75 year old male arrives in ED after 1 metre fall downstairs.
- Presents confused with a mild head injury and suspected fractured NOF.
- History of AF but anticoagulation therapy unknown.

Interprete the following clotpro analysis performed on this patient:

FIB-test			EX-test			IN-test			RWV-test			ECA-test		
CT	136s	▲ 55-87	CT	80s	▲ 38-65	CT	221s	▲ 139-187	CT	213s	▲ 48-77	CT	87s	▶ 68-100
A5	14mm	▶ 6-21	A5	55mm	▶ 39-58	A5	46mm	▶ 32-53	A5	51mm	▶ 38-55	A5	52mm	▶ 45-58
A10	16mm	▶ 7-23	A10	61mm	▶ 47-64	A10	54mm	▶ 41-61	A10	58mm	▶ 47-63	A10	59mm	▶ 54-66
MCF	18mm	▶ 9-27	MCF	65mm	▶ 53-68	MCF	58mm	▶ 49-65	MCF	62mm	▶ 54-68	MCF	65mm	▶ 61-72



Interpretation



RVV CT > EX CT: indication of DOAC therapy excludes vitamin K antagonist therapy
 RVV CT > 100 sec and ECA CT < 180 : FXa antagonist present excludes thrombin inhibitor
 RVV, EX and IN all prolonged by Fxa antagonist.

Follow up – Family member provides medication details.
 Apixaban 2.5 mg BD for AF