

RISK ASSESSMENT & TREATMENT GUIDE FOR OBSTETRIC THROMBOPROPHYLAXIS

DEFINITIONS			
High-Risk Thrombophilias	<ul style="list-style-type: none"> Factor V Leiden Homozygote Factor II Homozygote (= Prothrombin =G20210A) Factor V Heterozygote with Factor II Heterozygote Combination Antithrombin III Deficiency 		
Low-Risk Thrombophilias	<ul style="list-style-type: none"> Protien C Deficiency Protien S Deficiency Factor V Leiden Heterozygote Factor II Heterozygote 		
WHEN TO TEST	WORKUP		LABORATORY EVALUATION
History of unprovoked VTE 1st Degree relative with history of high-risk thrombophilia			Full Thrombophilia Panel: <ul style="list-style-type: none"> Protein C & S deficiencies Factor V Leiden Prothrombin G20210A Anticardiolipin Lupus Anticoagulant Anti-beta 2 glycoprotein
One or more IUDF or SAB after 10wga One or more preterm births due to condition associated with placental insufficiency (eclampsia/severe pre-e) Three or more unexplained SAB before 10wga			Acquired Thrombophilia Panel: <ul style="list-style-type: none"> Anticardiolipin Lupus anticoagulant Anti-beta 2 glycoprotein
ANTEPARTUM	TREATMENT		POSTPARTUM
HIGH RISK CATEGORIES			
Treat Throughout Entire Pregnancy			Treat Total 6 Weeks Postpartum
High-risk thrombophilia without history of VTE History of unprovoked VTE History of VTE caused by pregnancy or high estrogen state Antiphospholipid syndrome with prior adverse pregnancy outcome Low-risk thrombophilia with history of VTE	Prophylactic Dose		High-risk thrombophilia without history of VTE History of unprovoked VTE History of VTE caused by pregnancy or high estrogen state Antiphospholipid Syndrome without history of VTE, with previous adverse pregnancy outcome Low-risk thrombophilia with history of VTE
Long term anticoagulation before pregnancy Mechanical heart valve High-risk thrombophilia with history of VTE History of >2 VTE not already on treatment Antiphospholipid Syndrome with history of VTE	Therapeutic Dose		High-risk thrombophilia with history of VTE History of >2 VTE not already on treatment Antiphospholipid Syndrome with history of VTE
	Return to previous therapy		Long term anticoagulation before pregnancy Mechanical heart valve
INTERMEDIATE RISK CATEGORIES			
Starting at 28 weeks gestational age			For 10 days postpartum
Sickle cell disease Maternal heart disease Active lupus flare Active inflammatory polyarthropathy Active inflammatory bowel disease Uncontrolled nephrotic syndrome Type 1 diabetes mellitus with nephropathy	Prophylactic Dose		Sickle cell disease Maternal heart disease Active lupus flare Postpartum transfusion Immobilization/bedrest for >7 days per expert opinion
LOW RISK CATEGORIES			
If ≥ 4 factors = prophylactic treatment throughout pregnancy If 3 factors = prophylactic dosage starting at 28 weeks gestational age If < 3 factors = close surveillance			If ≥ 4 factors = prophylactic dosage for 6 weeks postpartum If 3 factors = prophylactic dosage for 10 days postpartum If < 3 factors = close surveillance
<input type="checkbox"/> Low risk thrombophilia without history of VTE <input type="checkbox"/> History of provoked VTE (i.e. long car ride, surgery) <input type="checkbox"/> 1st degree relative with history of estrogen-provoked VTE <input type="checkbox"/> Active smoker > 10 cigarettes/day <input type="checkbox"/> Age > 35 years old at expected delivery date <input type="checkbox"/> BMI > 40 pre-pregnancy <input type="checkbox"/> Active pre-eclampsia, mild or severe <input type="checkbox"/> Multiple gestation pregnancy <input type="checkbox"/> Immobility/strict bed rest for >7 days			<input type="checkbox"/> Low-risk thrombophilia without history of VTE <input type="checkbox"/> History of provoked VTE (i.e. long car ride, surgery) <input type="checkbox"/> 1st degree relative with history of estrogen-provoked VTE <input type="checkbox"/> Active smoker >10 cigarettes/day <input type="checkbox"/> Age >35 years old at delivery date <input type="checkbox"/> BMI > 40 pre-pregnancy <input type="checkbox"/> Cesarean delivery <input type="checkbox"/> Postpartum hemorrhage (> 1L of blood loss) <input type="checkbox"/> Active infection <input type="checkbox"/> Pre-eclampsia in this pregnancy, mild or severe <input type="checkbox"/> Multiple gestation pregnancy
DOSAGE GUIDES			
Therapeutic dosing	LMWH: Enoxaparin 1mg/kg SC q12h UFH: IV dose of 5,000 IU loading, then follow protocol and aPTT levels		
Prophylactic dosing	LMWH	50-90kg <50kg >90kg	40mg SC daily 20mg SC daily 40mg SC q12h
	UFH	First trimester Second trimester Third trimester	5,000 BID 7,500 BID 10,000 BID
UNIQUE CASES			
Ovarian hyperstimulation syndrome	Therapeutic dosage from onset to 12 weeks gestation only		
Acute VTE in this pregnancy	Therapeutic dosage until at least 6 weeks postpartum, for a total of 6 months from diagnosis		
Surgery during pregnancy (i.e. appendectomy)	Prophylactic dosage while inpatient during hospital stay		
Cardiomyopathy or maternal cancer	Prophylactic dosing at conception if pre-existing conditions or at time of diagnosis during pregnancy and continue through 6 weeks postpartum		
Mechanical heart valve	Maintain Coumadin if <= 5mg throughout; convert to therapeutic LMWK 1wk prior to delivery		