

Apixaban for treatment and/or prevention of recurrence of VTE/PE (excluding prevention of VTE after hip or knee replacement) – Initiation Checklist (primary care only)

For cautions, contra-indications and interactions, refer to SPCs: [apixaban 2.5mg tablets](#) and [apixaban 5mg tablets](#)
[NICE TA 341](#) - Apixaban for the treatment and secondary prevention of deep vein thrombosis and/or pulmonary embolism

Refer to: [Wirral Oral Anticoagulant Guidelines](#)

Patient details:

Name: _____ DOB: _____
Weight: _____ SrCr: _____

Creatinine Clearance Calculation (CrCL): Calculation of CrCl using Cockcroft and Gault equation** or a [reputable online CrCl calculator](#).

$\frac{(140 - \text{Age} \dots) \times \text{Weight} * \dots \times \text{CONSTANT} \dots}{\text{Serum creatinine (micromol/L)} \dots} = \dots \text{ ml/min}$

CONSTANT Male = 1.23 Female = 1.04

* Female use actual body weight if ≤ 60kg, if > 60kg use 60kg. Male use actual body weight if ≤ 70kg, if > 70kg use 70kg.

**Cockcroft and Gault does not apply to all patients. Exclusion criteria include: unstable serum creatinine, pregnancy, malnutrition, amputation and dialysis.

Renal Function:

Patient's CrCl is greater than 30mls/min (no dose adjustment necessary)

Patient's CrCl is between 15-29mls/min (use with caution)

Patient's CrCl is less than 15mls/min (apixaban contra-indicated)

Indication for apixaban as per marketing authorisation (treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE), and prevention of recurrent DVT and PE in adults) and [NICE TA341](#)

Baseline checks to be undertaken – aPTT, INR, Hb, U&Es and LFTs

Consider contraindications, cautions and interacting drugs using references at the top of the page

Standard dose for acute DVT and treatment of PE is 10 mg taken orally twice daily for the first 7 days followed by 5 mg taken orally twice daily.

Standard dose for prevention of recurrent DVT and PE is 2.5 mg taken orally twice daily. When prevention of recurrent DVT and PE is indicated, the 2.5 mg twice daily dose should be initiated following completion of 6 months of treatment with apixaban 5 mg twice daily or with another anticoagulant

	Dosing schedule	Maximum daily dose
Treatment of DVT or PE	10 mg twice daily for the first 7 days followed by 5 mg twice daily	20 mg
		10 mg
Prevention of recurrent DVT and/or PE following completion of 6 months of treatment for DVT or PE	2.5 mg twice daily	5 mg

Duration of treatment should be individualised after careful assessment of the treatment benefit against the risk for bleeding.

Patient has been counselled, given an apixaban alert card and [patient information leaflet](#)

Patient understands the risk/benefits of apixaban, including therapy being continued long term and understands that there is currently no antidote for potential bleeding risk.

Prescriber's Signature: _____

Date: _____