

evidence based guidelines

POST- OPERATIVE DEEP VENOUS THROMBOSIS

Above the knee and upper extremity DVT

EITHER treat with Direct Oral Anti-Coagulant (DOAC) for 3-6 months

- Rivaroxaban (Xarelto) 15mg twice daily x 21 days*, then 20mg daily (avoid if CrCl <30)
- Apixaban (Eliquis) 10mg twice daily x 7 days*, then 5mg twice daily (avoid if CrCl <15)

OR begin Low-Molecular Weight Heparin (LMWH) and transition to warfarin for 3-6 months

- Enoxaparin (Lovenox) 1mg/kg twice daily (1mg/kg once daily if CrCl <30) until INR > 1.8 *
- Begin warfarin at 2 - 5mg per day. Consider a higher dose for younger patients (esp. male)
- Check PT/INR in 2-3 days
- Goal INR 2.0 – 3.0

Below the knee DVT

Treat with DOAC or LMWH (as above) for 2 weeks

Treat for 3 months if any of the following are present:

- Presence of malignancy
- Persistent pain and/or swelling of affected leg after 2 weeks of treatment
- Ultrasound still positive for thrombosis after 2 weeks of treatment

* The physician ordering the test that identified the DVT should initiate treatment immediately. If that provider wishes primary care to assume management after initial treatment has been started, they should contact the PCP directly during standard business hours.