

REGIONAL ANAESTHESIA AND ANTI-COAGULATION – NHS TAYSIDE GUIDELINES

Drug	Acceptable time after drug for block performance	Administration of drug while spinal or epidural catheter in place	Acceptable time after block performance or catheter removal for next drug dose
Heparins			
UFH = unfractionated heparin			
Prophylactic sc UFH	4 hours or normal APTTR	Caution	1 hour
Therapeutic iv UFH	4 hours or normal APTTR	Caution^	4 hours
Prophylactic LMWH	12 hours	Caution	4 hours
Therapeutic LMWH	24 hours	Not recommended	4 hours*
Anti-platelet drugs			
NSAIDS	NAP	NAP	NAP
Aspirin	NAP	NAP	NAP
Clopidogrel	7 days	Not recommended	6 hours
Tirofiban	8 hours	Not recommended	6 hours
Dipyridamole	NAP	NAP	6 hours
Oral anti-coagulants			
Warfarin	INR ≤ 1.4	Not recommended	Post catheter removal
Prophylactic Rivaroxaban@	18 hours	Not recommended	6 hours
Therapeutic Rivaroxaban@	48 hours	Not recommended	6 hours

SPECIAL CIRCUMSTANCES

Major Trauma: Requires assessment of potential coagulopathy prior to regional anaesthesia.
Sepsis: Clinically significant systemic sepsis – relative contraindication to CNB due to the presumed increased incidence of epidural abscess and meningitis.
Uraemia: Safety of regional anaesthesia should be considered in patients on dialysis (heparin used), especially for catheter removal. Uraemia causes thrombocytopenia and platelet dysfunction.
Liver failure: These patients are associated with haemostatic abnormality. Prior to RA, coagulopathy must be assessed and corrected.
Massive transfusion: If RA considered once stable, an assessment of platelet function should ideally occur.
DIC: Incompatible with safe neuraxial blockade. Peripheral blocks, if considered, should be at compressible sites.

Block category	Examples	
Epidural with catheter		
Single-shot epidural		
Spinal		
Paravertebral blocks	Paravertebral block	
	Lumbar plexus block	
	Lumbar sympathectomy	
	Deep cervical plexus block	
Deep blocks	Coeliac plexus block	
	Stellate ganglion block	
	Proximal sciatic block (Labat)	
	Obturator block	
	Infraclavicular block	
	Vertical infraclavicular block	
	Supraclavicular block	
	Popliteal block	
	Femoral nerve block	
Superficial perivascular blocks	Inter-costal block	
	Interscalene block	
	Axillary block	
	Ilio-inguinal block	
	Ilio-hypogastric block	
Fascial blocks	TAP block	
	Fascia lata block	
	Forearm nerve blocks	
	Saphenous nerve block	
	Ankle block	
	Superficial cervical plexus block	
	Wrist block	
	Digital block	
	Bier's block	
	Local infiltration	



UFH – unfractionated heparin, sc – subcutaneous, NAP – no additional precautions, LMWH – low molecular weight heparin, APTTR – activated partial thromboplastin time ratio

^ - Commonly given after CNB during vascular surgery. High index of suspicion should be maintained towards signs of vertebral canal haematoma. * - Consider increasing to 24hours if block performance is traumatic.

@ - Manufacturer recommends caution with use of neuraxial catheters.