



Acute DVT Treatment:

Anticoagulation Selection Considerations

Clinical Situation	Recommended Anticoagulant	Considerations
Renal disease Creatinine clearance < 30 ml/min	Vitamin K antagonists (Warfarin) Unfractionated heparin can be used as initial therapy until Warfarin is therapeutic (INR 2-3)	*LMWH and DOAC (direct oral anticoagulants) are contraindicated with severe renal disease
Reversal agent needed	Vitamin K antagonists Unfractionated heparin	Warfarin – Vit. K, FFP UFH – protamine sulfate
Pregnancy	Low molecular weight heparin	Other agents can cross the placenta
Once daily oral therapy preferred	Vitamin K antagonist Rivaroxaban Apixaban	Rivaroxaban and apixaban are the only 2 DOACs approved as monotherapy *no pre treatment with Heparin needed)