

Appendix 1: Suggested time frames for temporary discontinuation of specific medications before non-emergent interventional radiology procedures*

Medication	Time frame for discontinuation before procedure	Comments
Warfarin	5 days, with repeat blood test before procedure to ensure INR < 1.5 (or < 2.0 depending on the procedure and the local practice)	Clinical effect indicated by INR
ASA	5–7 days	ASA is an irreversible platelet aggregator inhibitor; because the typical lifespan of platelets is about 10 days, patients taking ASA may be prone to bleeding for up to 7–10 days following its cessation ¹
Antiplatelet agent (e.g., clopidogrel)	5 days	Clopidogrel results in irreversible platelet inhibition
NSAID	24 hours	NSAIDs generally do not cause significant bleeding problems, except in patients with existing coagulopathies ²
Heparin, unfractionated; intravenous	4 hours	Clinical effect indicated by aPTT
Prophylactic heparin, unfractionated; subcutaneous	No need to stop	Clinical effect indicated by aPTT
Low-molecular-weight heparin	12 hours – prophylactic dosing 24 hours – therapeutic dosing	Low-molecular-weight heparin does not affect INR or aPTT

Note: ASA = acetylsalicylic acid, aPPT = activated partial thromboplastin time, INR = international normalized ratio.

*In cases where the referring clinician is unsure, consultation with the treating radiologist is recommended.

Source: Department of Radiology, Lakeridge Health Corporation, Oshawa, Ont.

References

1. Daniel NG, Goulet J, Bergeron M, et al. Antiplatelet drugs: Is there a surgical risk? *J Can Dent Assoc* 2002;68:683-7a.
2. Mannucci C, Douketis JD. The management of patients who require temporary reversal of vitamin K antagonists for surgery: a practical guide for clinicians. *Intern Emerg Med* 2006;1:96-104.