

Seymour Spine & Rehabilitation

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Anticoagulants Prior to Procedures

Some patients eligible for interventional pain procedures may be taking anticoagulants (blood thinners) prescribed by other physicians. There are risks in taking these medications prior to interventional pain procedures, including but not limited to, epidural hematoma and nerve injury. It is recommended that these medications be discontinued prior to these procedures to decrease these risks. **However, the anticoagulants should NOT be discontinued until the risks of doing so have been assessed by the prescribing physician and written clearance has been obtained by our office.** Below is the protocol for stopping anticoagulants prior to pain procedures:

NSAIDS	24 hours prior to procedure
Low Dose (baby) Aspirin	24 hour prior to procedure
High Dose Aspirin	7 days prior to procedure
Plavix (clopidogrel), Effient (prasugrel)	7 days prior to procedure
Ticlid (ticlopidine)	14 days prior to procedure
Warfarin (Coumadin)	5 days prior to procedure
Pradaxa (dabigatran)	5 days prior to procedure
Xarelto (rivaroxaban)	24 hours prior to procedure
Heparin IV	6 hours prior to procedure and PTT within normal limits
Heparin SC	12 hours prior to procedure and PTT within normal limits
LMWH (lovenox)	12 hours prior to procedure

There are certain herbal supplements and Over-The- Counter medications that can increase the risks for bleeding. Please be that you medication list given to us includes these supplements as well. It may be necessary to discontinue these as much as a week prior to the procedure.