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I am having an operation with Dr Ong What do I do with my blood thinners? Do I stop my anti-inflammatories?

Dr Ong designed this information sheet to assist his patients answer some very common problems related to stoppage of blood-thinning medications before surgery. It is very important these guidelines are followed, or surgery may be postponed.

**ASPIRIN / CARTIA / PLAVIX / CLOPIDOGREL / ASASANTIN / ASPRO / ASTRIX /
CARDIPRIN / COPLAVIX / DUO-COVER / SOLPRIN**

Aspirin can sometimes be continued for certain procedures. Please check with Dr Ong, your GP or cardiologist. Ideally, it should be stopped 5-7 days prior to your procedure.

Plavix/Clopidogrel/Co-Plavix/Duo-Cover/Clovix/Iscover/Piax/Plidogrel MUST BE STOPPED 7 days prior to your procedure. NO EXCEPTIONS. If these are taken, the procedure will be postponed.

WARFARIN / COUMADIN / MAREVAN

This medication is a powerful blood-thinner and must be stopped 7 days before any procedure. See next page on how to stop warfarin and replacing it temporarily with Clexane. Occasionally, warfarin can be stopped without switching to Clexane. Check with your GP or cardiologist.

PRADAXA (DABIGATRAN) / XARELTO (RIVAROXABAN) / APIXABAN (ELIQUIS)

If your kidneys have normal function: stop 48 hrs (2 days) before your procedure

If your kidneys are not normal: stop 72 hrs (3 days) before your procedure

FISH or KRILL OIL /GINGER /GINGKO / GARLIC / TURMERIC / VITAMIN E /CAYENNE PEPPER

These should preferably be stopped 2 weeks before your procedure.

Non-steroidal (NSAID) pain-killers – Ibuprofen, Nurofen, Voltaren, Mobic, Naproxen, Naprogesic, Maxigesic, Advil, Celebrex, Celecoxib, Meloxicam, Peroxicam, Indocid, Indomethacin, Panafen, etc. These should be stopped 5-7 days prior to your procedure. If you are very reliant on them, please discuss with Dr Ong if you can continue taking them leading up to surgery.

After stopping these blood-thinners, when do I restart them after my procedure/surgery?

Good question! These will depend on how the procedure goes and each patient will be different. Please check with Dr Ong or his team before your leave hospital to clarify when you should restart your blood-thinners.



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Stopping WARFARIN for surgery: INSTRUCTIONS

Warfarin is a powerful blood thinner. When intake of warfarin is stopped, its blood thinning effects take at least 5 days to wear off.

The anticoagulant (blood thinning) effect of warfarin is measured in the lab by a number called the INR (international normalised ratio). An INR of more than 2 (>2) usually means warfarin is thinning the blood adequately. A normal INR (without warfarin) is between 1 and 1.2. **Elective surgery cannot be safely performed with an INR of >1.5.**

Dr Ong has scheduled you for surgery and warfarin must be stopped for this to proceed safely. As the blood thinning effect of warfarin wears off, it usually has to be replaced with a short-acting blood-thinner called CLEXANE. Clexane thins the blood like warfarin, except its effects last only 12-24 hours. By using Clexane instead of warfarin, your blood can be thinned right up to the day before surgery. **Dr Ong recommends the following warfarin-stopping regimen below:**

7 DAYS BEFORE Procedure	3 DAYS BEFORE procedure	DAY BEFORE procedure	DAY OF procedure
V	V	V	V
<u>STOP WARFARIN</u>	GP measure	LAST DOSE	<u>DO NOT TAKE</u>
START Clexane	INR	of Clexane	<u>CLEXANE</u>

Clexane can be taken either as a once daily dose (larger dose, easier dosing) or twice daily dose (smaller dose each time, but less convenient). It can be self-administered or given by the GP or GP practice nurse.

Please contact Dr Ong's rooms if there are questions about stopping warfarin prior to your surgery.