Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Managing Anticoagulation and Antiplatelet Perioperatively

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Managing Anticoagulation and Antiplatelet Perioperatively

Patient Information

Surgical Admissions Lounge

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Introduction

You have been given this leaflet at your appointment with the pre-op clinic because you are taking one or more of these medications in the tables below.

Aims

To advise on when to stop these medications before surgery and when to restart them after surgery. This is to ensure your safety and to avoid clotting or bleeding before, during or after surgery.

Risks

Not stopping these medications appropriately may result in cancellation of your surgery. This includes if these medications were stopped too early or too late, so it is very important to follow the advice given in the table.

Benefits

Stopping these medications as advised in the table reduces the risk of cancelling your surgery and/or your risk of having a clot/bleed before, during and/or after your surgery.

If your surgery was postponed, please contact the pre-op clinic on **01942 264234** or **01942 264235**. (For orthopaedic surgeries on **01257 256340**). Staff will advise if you still need to stop the medication or if it is safe to continue taking. (This will depend on the new date for your surgery).

Name of Anticoagulation.	Date to stop before operation. (To be completed by pre-op clinic).	Date to restart after operation. (To be completed by SAL/ Ward before discharge).

Apixaban		
Dabigatran		
Edoxaban		
Rivaroxaban		
Warfarin		

Name of Antiplatelet.	Date to stop before operation (To be completed by pre-op clinic).	Date to start after operation (To be completed by Surgical Admission lounge / Ward before discharge).
Aspirin		
Clopidogrel		
Prasugrel		

Ticagrelor		



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