

WATERLOO

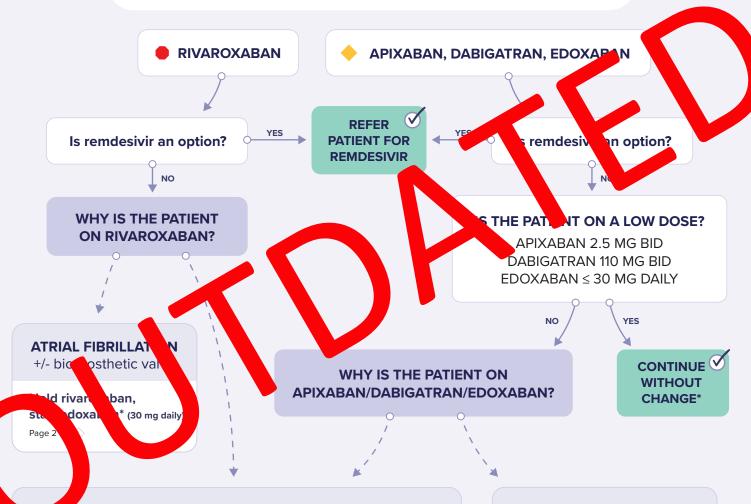
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PAXLOVIDTM

FOR A PATIENT ON A DOAC DIRECT ORAL ANTICOAGULANT



who is also at high risk of hospitalization from COVID-19 (e.g., unvaccinated or immunocompromised)



VTE/ATE

Venous thromboembolism/arterial thromboembolism

LOW RISK OF CLOT 4

Hold DOAC,

start aspirin*

Page 2

HIGH RISK OF CLOT

Hold DOAC.

start LMWH*

LMWH = Low molecular weight heparin

Page 2

High risk of clot includes:

- Clot within past 6 months
- Clot at any time in past when anticoagulation interrupted
- · Active cancer with clot at any point in cancer journey
- o Diagnosis of antiphospholipid antibody syndrome

ATRIAL FIBRILLATION

+/- bioprosthetic valve

CHANGE TO LOW DOSE

Apixaban Reduce to 2.5 mg BID Edoxaban Reduce to 30 mg daily Dabigatran Reduce to 110 mg BID (eGFR >50 mL/minute)

> Reduce to 75 mg BID (eGFR 30-50 mL/minute)

Resume usual dose 2 days after completing Paxlovid™.

*Decisions to hold, adjust, or change medications should be made on a patient-specific basis.

This document is intended for use by experienced clinicians, including prescribers and pharmacists. The information is not intended to replace sound professional judgment in individual situations, and should be used in conjunction with other reliable sources of information. Clinicians should always consider the risk/benefit profile for their individual patient, discuss these risks with the patient or caregiver before initiating therapy, and closely monitor for treatment benefit and adverse effects.







Contributors: Kelly Grindrod, BScPharm, PharmD, MSc. Claudia Bucci, BScPhm, PharmD, ACPR. Stephanie Carlin, PharmD, ACPR2. Andrea Chittle, MD, CCFP. Noah Ivers, MD, PhD, CCFP. Heather Kertland, PharmD, FCSHP. Tara Kiran, MD, MSc, CCFP, FCFP. Kori Leblanc, BScPhm, PharmD, ACPR. Catia Marzolini, PharmD, PhD. Kate Miller, MD, CCFP, FCFP. Menaka Pai, MSc, MD, FRCPC. Adrian Poon, BA. Alice Tseng, PharmD, FCSHP, AAHIVP. Kristen Watt, BScPhm, RPh. Samira Jeimy, MD, PhD, FRCPC. Reviewed by: Rosemary Killeen, BScPhm, PGCert, RPh.

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