**PERI-OPERATIVE MANAGEMENT OF ANTIPLATELET THERAPY**

**IN PATIENTS UNDERGOING NON-CARDIAC SURGERY/PROCEDURES**

- **Determine indication for antiplatelet therapy**
  - **SECONDARY PREVENTION**
    - in patients with a history of stroke, CAD/MI, PAD, venous or arterial thrombosis
  - **PRIMARY PREVENTION**
    - (no hx of stroke or MI)
    - and ALL OTHER INDICATIONS
  - **Recent PCI**
    - (percutaneous coronary intervention)
  - **Balloon Angioplasty**
    - Delay elective procedure at least 14 days post-angioplasty.
  - **Bare Metal Stents**
    - Delay elective procedure for 30 days after BMS implantation while on dual antiplatelet therapy
  - **Drug Eluting Stents**
    - **Preferred**: delay elective procedure for 6 months after DES implantation while on dual antiplatelet therapy.
    - **Alternative**: if risk of delaying procedure outweighs risk of stent thrombosis, consider delaying elective procedure for only 3 months.
  - **1. Intracranial, spine or posterior eye surgery**
    - Surgeon and prescribing provider from Cardiology/Vascular/Neurology to discuss whether and how long to hold all antiplatelet therapy
  - **2. Intervventional Radiology procedures**
    - For transjugular liver biopsy, percutaneous nephrostomy tube or percutaneous biliary drain placement, hold all antiplatelet therapy for 7 days prior to procedure if approved by prescribing provider from Cardiology/Vascular/Neurology
    - For all other procedures, continue aspirin without interruption; hold clopidogrel, prasugrel and ticagrelor for 7 days prior to procedure if approved by prescribing provider from Cardiology/Vascular/Neurology
  - **3. GI endoscopy/colonoscopy**
    - Continue aspirin without interruption; hold clopidogrel, prasugrel and ticagrelor for 7 days prior to procedure if approved by prescribing provider from Cardiology/Vascular/Neurology
  - **4. High risk chronic pain procedures**
    - Continue aspirin without interruption; hold clopidogrel, prasugrel and ticagrelor for 7 days prior to procedure if approved by prescribing provider from Cardiology/Vascular/Neurology
  - **5. Lumbar puncture; bone marrow biopsy; catheter placement or removal**
    - Continue aspirin without interruption; hold clopidogrel, prasugrel and ticagrelor for 7 days prior to procedure if approved by prescribing provider from Cardiology/Vascular/Neurology
  - **6. Minor dental, derm, ophth procedures**
    - Continue all antiplatelet therapy without interruption
  - **7. All other surgery/procedures**
    - Continue aspirin without interruption; hold clopidogrel, prasugrel and ticagrelor for 7 days prior to procedure if approved by prescribing provider from Cardiology/Vascular/Neurology

**NOTE:** these guidelines are not intended to supersede clinical judgement. Risk-benefit discussions between proceduralists and prescribing providers are strongly encouraged

**NOTE:** timing of resumption of antiplatelet therapy following procedures is based on assessment of post-procedural hemostasis

**NOTE:** these guidelines do not necessarily apply to pregnant women taking aspirin to reduce the risk of miscarriage