







Timing of preprocedural interruption of direct-acting oral anticoagulant (DOAC) therapy

DOAC	Procedural bleeding risk	Preprocedural DOAC interruption [NB1]					Day of surgical procedure (no DOAC)
		Day -5	Day -4	Day -3	Day -2	Day -1	
Apixaban [NB2] or Rivaroxaban [NB3]	high						
	low to moderate						
Dabigatran (CrCl 50 mL/min or more)	high						
	low to moderate						
Dabigatran (CrCl less than 50 mL/min) [NB3]	high						
	low to moderate						

CrCl = calculated creatinine clearance; DOAC = direct-acting oral anticoagulant

NB1: Although these timings are based on patients with atrial fibrillation taking a DOAC at doses recommended for stroke prevention, these recommendations can be applied regardless of the indication. The arrows indicate continuation of DOAC therapy, while the grey cells indicate DOAC therapy is withheld.

NB2: For patients taking apixaban, seek specialist advice if CrCl is less than 25 mL/min—a longer duration of interruption to therapy may be required.

NB3: For patients taking rivaroxaban or dabigatran, seek specialist advice if CrCl is less than 30 mL/min—a longer duration of interruption to therapy may be required. Patients taking rivaroxaban with a CrCl of 15 to 29 mL/min were not included in the relevant study.