### Rivaroxaban (Xarelto®) Orders

**Rivaroxaban is Contraindicated in:**

1. **Acute or Chronic Renal Failure:**
   - CrCl < 15 ml/min for A Fib, CrCl < 30 ml/min for DVT/PE prevention/treatment, Hemodialysis, Peritoneal Dialysis, CRRT
2. **Patients with mechanical prosthetic valves**
3. **NPO:** Doses of Rivaroxaban ≥ 15 mg (Rivaroxaban is dependent on the presence of food to achieve an adequate level of anticoagulation for the **TREATMENT** of DVT/PE or **Prevention** of stroke in A Fib)
4. **Concomitant medications with strong dual induction of CYP3A4 and P-glycoprotein:**
   - A. Rifampin, carbamazepine, phenytoin, St. John’s Wort, nevirapine, phenobarbital
5. **Concomitant medications with strong dual inhibition of CYP3A4 and P-glycoprotein:**
   - A. Protease inhibitors, clarithromycin, conivaptan,itraconazole, ketoconazole, and nefazadone
6. **Concomitant medications with moderate dual inhibition of CYP3A4 and P-glycoprotein and CrCl 15-80 ml/min (unless potential benefit justifies potential risk):**
   - A. Diltiazem, verapamil, fluconazole, grapefruit juice
7. **Hepatic Disease with associated coagulopathy or moderate to severe hepatic impairment**
   - Moderate Impairment (7-9 pts) or Severe Impairment (10-15 pts) on the Child Pugh Score

<table>
<thead>
<tr>
<th>Child-Pugh Score</th>
<th>1pt</th>
<th>2 pt</th>
<th>3pt</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Bilirubin (mg/dl)</td>
<td>&lt;2</td>
<td>2 - 3</td>
<td>&gt;3</td>
</tr>
<tr>
<td>Albumin (g/dl)</td>
<td>&gt;3.5</td>
<td>2.8 - 3.5</td>
<td>&lt;2.8</td>
</tr>
<tr>
<td>PT / INR</td>
<td>&lt;1.7</td>
<td>1.7 - 2.3</td>
<td>&gt;2.3</td>
</tr>
<tr>
<td>Ascites</td>
<td>None</td>
<td>Mild</td>
<td>Mod to Severe</td>
</tr>
<tr>
<td>Hepatic encephalopathy</td>
<td>None</td>
<td>Grade 1-2</td>
<td>Grade 3-4</td>
</tr>
</tbody>
</table>

**1. Initiation**
- [ ] New Start
- [ ] Home Therapy Continued

**2. Start time**
- [ ] Initiate Now
- [ ] Start (Date/Time) ____________

**3. Indication and Dose:**

**Venous Thromboembolism Prophylaxis For Orthopedic Procedures**
- [ ] Rivaroxaban 10 mg PO Q AM (CrCl ≥ 30 mL/min)

**Atrial Fibrillation** (Prophylaxis of Cerebrovascular accident)
- [ ] Rivaroxaban 20 mg PO WITH DINNER Daily (CrCl > 50 mL/min)
- [ ] Rivaroxaban 15 mg PO WITH DINNER Daily (CrCl 15-50 mL/min)

**Deep Vein Thrombosis (DVT)/Pulmonary Embolism (PE) Treatment** (CrCl ≥ 30 mL/min)
- [ ] Rivaroxaban 15 mg PO BID (with meals) X 21 Days, followed by Rivaroxaban 20mg PO WITH DINNER Daily
- [ ] Rivaroxaban 20 mg PO WITH DINNER Daily (Secondary prevention after PE/DVT)

**4. Baseline Lab Monitoring (INPATIENT)**
- [ ] CBC and SCr prior to initiation

**5. Baseline Lab Monitoring (OUTPATIENT)**
- [ ] SCr within 90 days ___/Date____

**6. Sustained Lab Monitoring**
- [ ] Serum creatinine (Scr) Q 72hrs
- [ ] CBC Q 72hrs

**7. Additional Orders**
- [ ] Discontinue IV, SQ, and PO **ANTICOAGULANTS** (except heparin flushes) including:
- [ ] If patient on IM medications, check with prescriber before administering by the IM route while on Rivaroxaban
- [ ] Notify the prescriber for any abnormal bleeding or black, tarry stool
- [ ] Do not administer and notify prescribing practitioner if INR ≥ 3 (patients transitioning from warfarin).
- [ ] Patient/Caregiver Education: Please review Rivaroxaban Patient Educational Packet

**MD Signature:** __________________________  **Date:** ____________  **Time:** ____________

**Clinical Decision Support:** DO NOT OVERLAP; Agent reaches therapeutic levels within 2 hrs

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**Origin:** 4/12; 1/13; 2/13; 3/15

**Enoxaparin, Heparin, Bivalirudin, Argatroban, Apixaban, Dabigatran, Edoxaban, Warfarin, Fondaparinux**