Jackson County Medical Control Authority

MICU Protocols

GLYCOPROTEIN IIB/IIIA RECEPTOR ANTAGONIST FOR ACUTE CORONARY **SYNDROMES**

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Glycoprotein IIb/IIIa Receptor Antagonist for Acute Coronary Syndromes

Indications:

In combination with Heparin for the treatment of acute coronary syndromes, including unstable angina and non Q-wave AMI and for those patients who are to be managed medically and those undergoing PTCA or artherectomy.

Contra-indications:

- 1. Known hypersensitivity.
- 2. Active internal bleeding or a history of significant bleeding within the previous 30
- 3. History of intracranial hemorrhage, intracranial neoplasm, arteriovenous malformation or aneurysm.
- 4. History of thrombocytopenia following prior exposure to Aggrastat, Integrelin or
- 5. History of CVA within 30 days or any history of hemorrhagic stroke.
- 6. Major surgical procedure or severe physical trauma within previous month.
- 7. History, symptoms or findings suggestive of aortic dissection.
- 8. Severe HTN (systolic BP > 180 mmHg and/or diastolic BP > 110 mmHg).
- 9. Concomitant use of another parenteral IIb/IIIa inhibitor.

Adverse Effects: Bleeding, edema/swelling, hypotension, bradycardia, pain, dizziness, sweating, nausea.

Administration: All may be used with ASA and Heparin

Integriline (Eptifibatide): IV bolus 180 mcg/kg, then continuous IV infusion of 2

mcg/kg/min, up to 72 hours.

Aggrastat (Tirofiban): IV 0.4 mcg/kg/min for 30 minutes then 0.1 mcg/kg/min;

give 2 dose in renal disease.

IV 250 mcg (0.25 mg) /kg bolus, then continuous IV ReoPro (Abciximab):

infusion of 10 mcg/min for up to 12 hours.

MICU Directives:

- 1. Follow generalized protocol for MICU transport.
- 2. Maintain appropriate delivery rate by IV infusion pump.
- 3. Monitor V/S every 5-10 min.
- 4. Discontinue after notifying appropriate medical facility if patient develops severe hypotension, active bleeding or hypersensitivity.