Regional Anesthesia in the Patient Receiving Antithrombotic or Thrombolytic Therapy: American Society of Regional Anesthesia and Pain Medicine Evidence-Based Guidelines (Fourth Edition): Erratum

The last name of author Erik Vandermeulen was misspelled in the recent article that appeared in the April 2018 issue: Regional Anesthesia in the Patient Receiving Antithrombotic or Thrombolytic Therapy: American Society of Regional Anesthesia and Pain Medicine Evidence-Based Guidelines (Fourth Edition). In addition, the following errors have been noted in the text:

Recommendation 3.4.1 on page 272 is a new recommendation. The Remarks following the recommendation should read: “This is a new recommendation. Earlier guidelines did not specify a time interval between SC administration of UFH and neuraxial blockade. These recommendations are based on the pharmacology of SC 5000-U dose of UFH, which results in a significant anticoagulant effect that persists 4 to 6 hours after administration.”

Recommendation 3.4.4 on page 272 should be corrected to read: “Recommendation 3.4.4 Postoperative low-dose UFH. There is no contraindication to maintaining neuraxial catheters in the presence of low-dose UFH. We suggest catheter removal occur 4 to 6 hours after heparin administration. Subsequent heparin administration may occur immediately after neuraxial blockade or catheter removal (grade 2C). Remarks: This recommendation has been updated. Previously a 1-hour time interval was recommended between neuraxial blockade or catheter removal and administration of low-dose SC UFH. These recommendations were based on the pharmacology of SC 5000-U dose of UFH, which does not result in a significant anticoagulant effect for at least 1 hour after administration.”

Recommendation 13.5 on page 286 should state “13.5 Platelet GP IIb/IIIa. The platelet GP IIb/IIIa inhibitors exert a profound effect on platelet aggregation. Following administration, the time to normal platelet aggregation is 24 to 48 hours for abciximab and 4 to 8 hours for eptifibatide and tirofiban.”

REFERENCE