Coagulation concerns in patients with COVID-19 proposed for regional anesthesia

To the Editor

Recently, we published practice recommendations about regional anesthesia in patients with suspected or confirmed COVID-19.1 Many anesthesiologists have embraced regional anesthetic techniques during the COVID-19 crisis due it presumed physiological benefits as well as possible reductions in transmission risks. There may be some unique characteristics of the coagulation state of patients with COVID-19 that we thought merited a communication.

Mild thrombocytopenia is common in the affected population, but platelet count is rarely less than 100,000/mL.2 Around 20%–55% of hospitalized patients for COVID-19 have laboratory evidence of COVID-19 should receive thromboembolic prophylaxis, with some evidence supporting low molecular weight heparin for pregnant women with confirmed COVID-19 even at home.3 4 Standard regional anesthesia precautions are in order for starting and stopping anti-coagulation.5

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