EACTA SURVEY ON COAGULATION MANAGEMENT IN CARDIAC OPERATIONS

| | Section I – Institution details |
|---------|---|
| Institu | tion: |
| Count | ry: |
| Numb | er of cardiac operations during the last 12 months: |
| | Number of adult cases: Number of pediatric (< 12 ys) cases: |
| | If the Institution is doing Pediatric Cases, in the following sections please answer only with regard to adult cases, unless differently stated |
| | Section II – Preoperative assessment |
| 1. | Before a cardiac operation, with or without CPB, please indicate which kind of hemostasis/coagulation assessment is routinely followed, besides the common laboratory test (aPTT, PT, Platelet Count, Fibrinogen level) |
| | Antithrombin (ATIII) activity. Thromboelastography Bleeding time Platelet Function Analyzer Other kinds of platelet function tests (i.e. aggregometry) Research of antibodies for HIT diagnosis |
| 2. | In selected populations of patients under major anti-platelet therapy, patients receiving intravenous heparin, patients under warfarin therapy), which kind of additional tests are performed? |
| | ATIII activity Thromboelastography Bleeding time Platelet Function Analyzer Other kinds of platelet function tests (i.e. aggregometry) Research of antibodies for HIT diagnosis Coagulation factors activity determination (i.e. vWF, Factor V) |

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| 3. Please indicate the percentage of patients in which the following tests were performed before a cardiac operation during the last 12 months. | |
|--|----|
| □ ATIII activity% □ Thromboelastography% □ Bleeding time% □ Platelet Function Analyzer% □ Other kinds of platelet function tests (i.e. aggregometry)% □ Research of antibodies for HIT diagnosis% □ Coagulation factors activity determination (i.e. vWF, Factor V)% | |
| 4. In case of low ATIII activity values before a cardiac operation, are you correcting this valueing purified ATIII? | ue |
| □ Yes □ No | |
| If you correct a low ATIII activity value before the operation, which is the threshold value for using purified ATIII? | r |
| ATIII value □ < 50% □ < 55% □ < 60% □ < 65% □ < 70% □ < 75% □ < 80% | |
| 5. In case of low antithrombin activity values before a cardiac operation, are you correcting this value using fresh frozen plasma? | |
| □ Yes □ No | |
| 7. What is the percentage of patients receiving purified ATIII before a cardiac operation in your Institution during the last 12 months:% | |
| 8. How do you expect will evolve (increase or decrease) the % of patients receiving purified ATIII before a cardiac operation in your Institution in the following 3 years?:% per year. | |
| | |

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Section III – Pre and during CPB coagulation management

| 1. | From the total cardiac operations in adults performed ATIII your Institution during the last 12 months, which % did require CPB?: |
|--------|--|
| 2. | Which of the following drugs are ROUTINELY used before or during CPB? |
| _ _ | Tranexamic acid Other antifibrinolytic agents (excluded aprotinin) Aprotinin |
| | How much is the ACT value considered adequate for establishing and maintaining CPB in ur Institution? |
| | > 400 seconds > 450 seconds > 480 seconds > 500 seconds |
| | How are you monitoring the adequacy of anticoagulation before and during CPB? Celite standard ACT Kaolin standard ACT Heparin monitoring systems (HMS or others) |
| 5. | How much is the heparin bolus dose that you give before going on CPB?IU/kg |
| r | From the total CPB performed, which % did develop heparin resistance (defined as failure to reach an adequate ACT despite a standard dose of heparin, or to maintain the ATC during CPB)?: |
| | In case of heparin resistance, what do you do? I only give further doses of heparin until normalization of ACT I give a supplemental dose of heparin, if the ACT is still low, I give purified ATIII I give a supplemental dose of heparin, if the ACT is still low, I give fresh frozen plasma I immediately give purified ATIII Dose (Adults) |

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Section IV – Post CPB coagulation management

| 1. | Which of the following drugs are ROUTINELY used after CPB? |
|--------|---|
| | Tranexamic acid Other antifibrinolytic agents (excluded aprotinin) Aprotinin Desmopressin |
| | How do you antagonize heparin? Protamine ATIII a 1.3 to 1 ratio Protamine ATIII a 1 to 1 ratio I follow the indications of the heparin monitoring system (HMS or others) I follow the indications of a TEG with and without heparinase |
| | Which of the following tests are ROUTINELY done after CPB? TEG PFA – 100 Other platelet function assays |
| 4. | Which of the following tests are done after CPB in selected population of patients? TEG $ PFA-100 \\ Other platelet function assays $ |
| 5. | In presence of the evidence for postoperative bleeding inside the operating room, what strategy are you following? Additional dose of protamine, if ineffective fresh frozen plasma and/or platelets Check the coagulation with TEG and/or platelet function tests and apply the needed therapy |

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Section V – ICU management

| 1. | Which of the following tests are routinely performed ATIII the arrival in ICU? | |
|--------------------------------------|--|--|
| | ATIII activity Thromboelastography Bleeding time PFA – 100 Sonoclot Other kinds of platelet function tests (i.e. aggregometry) | |
| 2. | In presence of low ATIII activity values, are you correcting with purified ATIII? Yes No | |
| If yes, what is the threshold value? | | |
| | CIII value < 40% | |
| 3. | From the total cardiac operations in adults performed ATIII your Institution during the last 12 months, which % did require purified ATIII supplementation ATIII ICU?:%. | |
| 4. | Please indicate the rate of patients receiving the following blood products in your Institution during the last 12 months. | |
| | Packed red cells% Fresh frozen plasma% Platelets% Cryoprecipitates% Recombinant Factor VII% | |
| 5. | Are you satisfied with the present situation of hemostasis/coagulation management ATIII your Institution? Completely Partially. No | |
| | Additional comments | |