

Edinburgh Cancer Centre

Insert addressograph here

Edinburgh Cancer Centre
 Western General Hospital
 Crewe Road South
 Edinburgh

Date _____

Dear Dr _____

Your patient was recently found to have a blood clot and has been started on dalteparin. They should remain on dalteparin for the duration of their anticoagulation. Dalteparin is associated with better outcomes than warfarin in advanced cancer patients, and is easier to manage during chemotherapy. A decision has been made by the oncology team that dalteparin would be more appropriate than a DOAC such as Edoxaban for this patient. Dalteparin requires no routine monitoring of anticoagulant effect or of FBC. If there is evidence of new or progressing clot or an unexplained drop in platelet count (to <140 or a drop of $\geq 30\%$) then please get in touch with haematology immediately, in case of HIT (heparin-induced thrombocytopenia). Patients should receive 200U/kg for 1 month then 150U/kg for the next 5 months*. Dose may need adjusted if there is a significant change in weight over the course of treatment and dalteparin should be omitted if eGFR<30 or platelets <50. Extended use dalteparin in patients with solid tumours was approved by the Lothian Joint Formulary in 2011. Thank you for continuing this prescription as below.

Patient details

Name		CHI	
Consultant		Cancer diagnosis	
Clot diagnosis			
Weight (kg)		eGFR(umol/L)	Platelets

Dalteparin hospital prescription

Starting dose		Start date	
10 days supply given on discharge from hospital Date:			

Action required from GP - Please prescribe:

	Dose (units)	Dose (mls)	Time period
Dalteparin 200units/kg body weight [rounded to fixed dose syringe]	Subcutaneously, once daily		days
THEN			
Dalteparin 150units/kg body weight [rounded to fixed dose syringe]	Subcutaneously, once daily		For at least 5 further months*

* In the context of advanced cancer we would often suggest continuing dalteparin indefinitely, unless or until the risks outweigh the perceived benefits. In the curative setting, patients can usually be changed to an oral anticoagulant as per Lothian Joint Formulary once cancer therapies have completed. If you anticipate any problems with this prescription, please contact the consultant's secretary through WGH switchboard on 0131 537 1000.

With thanks,

Dr (signature) _____ (print) _____ Date _____

Please ensure this communication is filed in patient's hospital medical notes after faxing

Dalteparin GP letter	Page No. Page 1 of 1	Last Reviewed: March 2019
Authorised by: CTAC	Issue No: 1.2	Next Review Due: March 2021
Implementation date: March 2019		