

Table. Risk Stratification for Perioperative Arterial and Venous Thromboembolism to Guide Whether Bridging Anticoagulation Is Needed

| Thromboembolic Risk Category | Clinical Indication for Warfarin Therapy | | |
|---------------------------------------|--|---|--|
| | Atrial Fibrillation | Mechanical Heart Valve | Venous Thromboembolism |
| High risk (annual risk >10%)* | CHADS ₂ score 5 or 6 Recent (within 3 mo) stroke/TIA Rheumatic valvular heart disease | Any mechanical mitral valve Older aortic mechanical valve (caged-ball, tilting disk) Recent (within 3 mo) stroke or TIA | Recent (within 3 mo) VTE High-risk thrombophilia‡ |
| Moderate risk (annual risk 5% to 10%) | CHADS ₂ score 3 or 4 | Bileaflet aortic valve prosthesis with ≥1 risk factor† | VTE within 3–12 mo Moderate-risk thrombophilia§ Recurrent VTE Active cancer |
| Low risk (annual risk <5%) | CHADS ₂ score 0–2 (no prior stroke or TIA) | Bileaflet aortic bileaflet without any risk factors† | VTE >12 mo ago |

CHADS₂ indicates score based on cardiac failure-hypertension-age-diabetes-stroke; VTE, venous thromboembolism; and TIA, transient ischemic attack.

*Additional patients who may be at high risk include those with prior thromboembolism during interruption of warfarin.

†Age ≥75 years, atrial fibrillation, congestive heart failure, hypertension, diabetes mellitus, or stroke or TIA.

‡Deficiency of protein C, protein S, or antithrombin; antiphospholipid syndrome; homozygous factor V Leiden or prothrombin gene mutation.

§Heterozygous factor V Leiden or prothrombin gene mutation.

||Cancer that is metastatic or treated within the past 6 months.