Dual antiplatelet therapy
(Aspirin and an ADP receptor antagonist)

High risk situation?
• < 4 weeks post-MI, PCI or BMS
• < 12 months post-drug-eluting stent*
• “High risk stents” (those requiring dual antiplatelet therapy for > 12 months)

N.B. After surgical assessment of haemostasis, early re-institution is important.

Stop ADP receptor antagonist (clopidogrel/prasugrel/ticagrelor)
7 days pre-op.
Continue aspirin.

Only vital surgery should be performed
Do not proceed unless approved by cardiology
*Some new DES (e.g. Onyx stent) now require as little as one month DAPT

Risk of bleeding in a closed space?
• Posterior segment eye surgery
• Spinal surgery

N.B. After surgical assessment of haemostasis, early re-institution is important.