Guide to Enoxaparin (Lovenox) Therapy

*Treatment to Prevent Blood Clots*
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Reasons for taking enoxaparin (Lovenox)

Enoxaparin may be given if you are at risk for a blood clot due to:

☐ A past blood clot in the legs or lungs
☐ Hip or knee replacement surgery
☐ Stopping warfarin therapy for surgery
☐ Just starting warfarin therapy (the warfarin in your blood has not reached the right level)
☐ Bed rest
☐ Cancer
☐ Acute illnesses or other reasons as determined by your health care team:

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☐ Due to surgery or a medical condition, you are at risk for blood clots after you leave the hospital. Your movement may be limited while you heal, or you may be on bed rest. This increases the chances that a blood clot might form.

Enoxaparin is an anti-coagulant (sometimes called a blood thinner). This drug prevents new clots from forming and stops existing clots from growing larger. Your health care team may ask you to inject enoxaparin at home. This will help protect you from getting more clots.

How long will I be on enoxaparin?

The length of time you are on enoxaparin depends on why you are taking it. You may start using the drug while you are in the hospital. Usually treatment lasts for 7 to 10 days, but can last longer.

How to use enoxaparin

Use enoxaparin as directed by your health care team. Step-by-step directions can be found at the end of this booklet.

- Enoxaparin is injected under the skin, into fatty tissue (not into muscle).
- Enoxaparin is usually injected in the abdomen (belly). You must use a new area of the belly each time.
- Do not use the syringe and needle more than once time. Each syringe has enough medicine in it for one shot.
- You should inject at the same time every day. It is usually done every 12 hours or every 24 hours. Your doctor will tell you how often you need to inject the medicine.
- If you miss a dose, inject it as soon as you remember it. But if it is almost time for your next dose, skip the missed dose. Never inject two doses at the same time.
- Do not use the syringe if it leaks or if the fluid is dark or has floating pieces.

Storage

- Keep this medicine out of reach of children.
- Store the vial or pre-filled syringes at room temperature and away from heat and moisture (not in the bathroom).
Problems to watch for

**Bleeding**

Enoxaparin may cause you to bleed more easily. Some signs of bleeding are easy to see, others are not.

To reduce your risk of bleeding:

- Stay away from rough sports or other activities where you could be bruised, cut or injured
- Brush and floss your teeth gently
- Be careful when using sharp objects (such as razors or fingernail clippers)

Call 911 if you have:

- A sudden, severe headache
- Bleeding that will not stop

Call your health care team right away if you have signs of bleeding:

- Red or black stools (bowel movements)
- Red or orange urine
- Coughing up or throwing up blood or material that looks like coffee grounds
- Nose bleeds that last 10 minutes or more
- Severe upset stomach that will not go away
- Swollen ankles or feet

**Clotting**

You are taking enoxaparin because you have a risk of forming blood clots.

To help prevent blood clots:

- Avoid sitting for long periods of time
- While you are awake, try to move around at least once an hour
- If you cannot walk around, try to move your feet or stretch your legs while you are sitting

Call 911 if you have:

- Any signs of a stroke:
  - Sudden numbness or weakness in your face, arm or leg, often on one side of your body
  - Sudden confusion or trouble speaking, reading or understanding what is being said
  - Sudden blurred or decreased vision in one or both eyes
  - Sudden trouble walking or moving a part of the body (includes loss of balance or feeling dizzy)
  - Sudden severe headache for no reason
  - Sudden fainting or seizures

- Shortness of breath or other problems breathing

Call your health care team if you have:

- Sudden pain or tenderness in your leg or arm
- Sudden swelling of your leg or arm
- Changes in skin color on your leg or arm. Skin may become red, black, blue or green. Watch for a rash or dark spot under the skin.
**Other medicines and enoxaparin**

Certain medicines may increase the risk of bleeding if taken with enoxaparin. It is important to find out from a health care provider which medicines are safe to take. Talk with your health care team before you take:

- Aspirin (also in Pepto-Bismol, Kaopectate, and other products). *Always check with your pharmacist to see if a drug store product has aspirin in it.*
- Pain or arthritis medications such as ibuprofen (Motrin, Advil) and naproxen (Aleve)
- Cilostazol (Pletal)
- Clopidogrel (Plavix)
- Dipyridamole (Persantine, Aggrenox)
- Prasugrel (Effient)
- Ticagrelor (Brilinta)

**Medical conditions and enoxaparin**

Tell your health care team if you have or have had:

- A mechanical or artificial heart valve
- Kidney disease
- Infection in your heart
- Stroke
- Bleeding disorder (such as hemophilia)
- Ulcers of the stomach or small bowel
- Low platelet count
- Surgeries or procedures (including dental procedures)
- Any type of spine surgery (including spine implants, pain pump or epidural)

Also, tell your health care team if you are pregnant, plan to become pregnant or are breastfeeding.

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**If you fall**

During a fall, you may hit furniture and other objects. Each part of your body that gets hit may have bleeding, even if you *cannot* see it.

**If you have bleeding:** Put direct pressure on the area and call your care team. If the bleeding does *not* stop, call 911 or go to the emergency room.

**If you have bruising:** Draw a circle around all areas of the body that were hit in the fall. Check them every 5 minutes, drawing new circles as the bruises get larger.

- If they keep getting larger after 20 minutes, call your care team.
- If you *cannot* reach your care team, go to the emergency room.
Getting ready to give the injection

1. Clean your work surface with soap and water, alcohol or household cleaner.
2. Wash your hands with soap and water for 15 seconds. Dry well.
3. Place your supplies on the clean work surface.
   - If you draw up from a vial, you will need:
     - Alcohol wipes
     - Insulin syringe 3/10 cc
     - 3 ml vial of enoxaparin 100 mg/ml
   - If you use a pre-filled syringe, you will need:
     - Alcohol wipe
     - Syringe with enoxaparin
4. Check label on your medicine for the correct medicine name and concentration. Also, make sure the medicine is not expired.
5. Remove the syringe from its package. If you are using a vial for the first time, remove the plastic top.

How to draw up enoxaparin from a vial

1. Wipe the rubber top of the vial with an alcohol wipe and allow to dry.
2. Your dose is _____ mg, which is _____ units on the insulin syringe.
3. Pull the needle cover off of the insulin syringe.
4. Draw back the same amount of air into the syringe as the units of enoxaparin.
5. Insert the needle into the vial and push the air in.
6. Pick up the vial and turn it over and slowly pull back on the plunger to draw out the correct dose.
7. If you see air bubbles, push the enoxaparin back into the vial and then slowly pull down on the plunger again. You can also gently tap the syringe to move the bubbles to the top and then push them back into the vial. Repeat this until you do not see any bubbles.
8. Double check that you have the correct dose (_____ units) and remove the syringe from the vial. Carefully recap the syringe.
9. Follow the directions below for how to give the injection.
10. Store the vial at room temperature. Throw it away after 28 days.

How to give the injection from a syringe (drawn up or pre-filled)

1. Sit or lay back in a comfortable position so you can see your belly (abdomen).
2. Select an area on the right or left side of your belly (see page 8). For children: Your nurse may instead suggest the upper arm (if over 1 year old) or thigh (if less than 1 year old). Follow the nurse’s advice.
   - Do not inject within 2 inches of your belly button.
   - Each time you inject your medicine, switch to the other side of the belly.
   - Enoxaparin should NOT be injected into moles, scar tissue, bruises, tattoos or burn sites.
3. Clean the area with an alcohol pad. Allow to dry.
4. While the area dries, remove the needle cap from the syringe by pulling it straight off the syringe. Do not set the needle down or touch the needle.
5. If you are using a pre-filled syringe, it has a bubble that preserves the medicine.
   - If you are using the entire dose in the syringe, this bubble will be pushed in when you give the injection.
   - If your dose is less than a full syringe, you will need to push the bubble out of the syringe to get the correct dose. Follow these steps:
     - Hold the syringe with the needle tip pointing up
     - Tap the syringe to move the bubble to the top of the syringe
     - Push the plunger up and use the lines on the syringe to measure the correct amount of enoxaparin; this will push the bubble out.
     - If you have a drop of enoxaparin at the tip of the needle, point the needle down and tap the syringe to remove it

   If you drew up your medicine yourself, you may skip step 5. There is no bubble.

6. Hold the syringe like a pencil in the hand you write with.

7. With your other hand, gently pinch the area between your thumb and finger to form a roll of fatty tissue. Do not inject into muscle as that may cause bleeding into the muscle.

8. Insert the needle quickly into the fatty roll at a 90-degree angle, making sure the needle is completely under the skin.

9. Do not let go of the roll of fatty tissue until you have removed the needle.

10. Press down slowly on the plunger with your finger until all of the medicine is gone.

11. Remove the needle, and let go of the fatty tissue.

12. To avoid bruising, do not rub the injection site. Press gently on the site with the alcohol wipe until it stops bleeding.

13. If you use a pre-filled syringe, point the needle away from you and others. Press the plunger on the syringe to pop a cover over the needle.

14. Discard the syringe into a special Sharps container. (See Sharps Disposal handout.)

Special Instructions:

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Tips for choosing a site to inject

The drawing here gives you a map of the sites for injecting into the abdomen (belly area). This area has a layer of fat between the skin and muscle.

When you choose a site, follow these tips:

• Use a different site with each shot
• Make sure the next site is at least one finger-width away
• Wait 2 weeks before injecting into the same site again
• Stay at least 2 inches away from the belly button

If you see any unusual lumps, tenderness or bleeding after a shot, call your health care team.

Remember to read the Sharps Disposal sheet to learn how to safely throw out needles and syringes.