

DOAC	Indication	Dose	Renal dose adjustments	Switching to warfarin	Switching from warfarin	Reversal agent	Drug interactions	Other/Misc
<b>Edoxaban (Savaysa)</b>	A fib	60 mg daily	CrCl > 95 mL/min: Avoid use CrCl 15-50: 30 mg daily CrCl < 15: Avoid use	Decrease edoxaban dose by 50% and begin warfarin concomitantly. Check INR weekly timed right before the edoxaban dose is due and D/C edoxaban when INR ≥ 2.0	D/C warfarin and start edoxaban when INR ≤ 2.5		Avoid use with rifampin	Tablet may be crushed  Can be administered via G-tube
	DVT/PE treatment	Parenteral anticoagulant for 5-10 days, then 60 mg daily	CrCl 15-50 or weight ≤ 60 kg: 30 mg once daily CrCl < 15: Avoid use	OR  D/C edoxaban and administer parenteral anticoagulant and warfarin at time of next scheduled edoxaban dose. D/C parenteral agent when INR ≥ 2.0				

## References:

Savaysa (edoxaban) [package insert]. Parsippany, NJ: Daiichi Sankyo, Inc.; 2017 November.