WARFARIN

A GUIDE TO THERAPY

"For those who Served"

OVAMC Anticoagulation Clinic

Contact Information

If you have a medical emergency:

PLEASE call 911 or proceed to the nearest emergency room

If your concern is not emergent please call:

TeleCare Triage Phone Number
- 407-599-1404
- 24 hours/day; 7 days/week

Anticoagulation Clinic
- 407-631-4757 (if no answer, use above phone#)
- 8:00 a.m. - 4:30 p.m. Monday-Friday

Or use our online secure messaging system available through **MyHealtheVet**

Disclaimer:
The information contained in this booklet has been produced as a guide only. It is not intended to tell you everything about this medication. It does not take the place of your doctor, pharmacist, or nurse's medical advice.

More inside!

Dear Veteran,

Welcome to Orlando VA Medical Center Anticoagulation Clinic. Your doctor has requested that you join our program. Our goal is to manage your warfarin therapy safely and effectively. This requires teamwork and good communication between you and your anticoagulation pharmacist.

This booklet contains important information about your medication and your responsibilities as a patient in our program. Please read the information carefully. We recommend that you keep a record of your dose instructions and laboratory results. The tables at the end of this booklet have been provided for your use.

If you have any further questions about warfarin, please call the Anticoagulation Clinic at 407-631-4757. Office hours are 8:00 a.m. - 4:30 p.m., Monday-Friday (closed weekends and federal holidays) or TeleCare 24/7 at 407-599-1404.

Sincerely,

Orlando VA Medical Center Anticoagulation Clinic

Orlando VA Medical Center Anticoagulation Clinic - contact information

If your concern is NOT emergent, please call:

TeleCare Triage Phone Number

- 407-599-1404; choose nursing option (#4)
- Available 24 hours/day; 7 days/week
- Call for the following reasons:
  - Speak to nurse about health concerns
  - Call to obtain lab results and dosing instructions 24 hours after blood drawn
  - Have TeleCare nurse send a message to an anticoagulation pharmacist regarding questions or need to reschedule your appointment or if you will be late

APPOINTMENTS

- **If you do not see an appointment on your appointment list or if it has been greater than 6 weeks since your previous anticoagulation appointment, contact the Anticoagulation Clinic immediately.**

- Please notify the anticoagulation clinic **PRIOR** to your appointment time if you think that you will be late or will miss your appointment so that you can be rescheduled

- If you consistently miss your appointments without notifying the Anticoagulation Clinic, you will be asked to make alternative arrangements for obtaining your medication, warfarin, and INR monitoring.

Ways to check appointments:

- TeleCare - choose scheduling option (#3) [8:00 a.m. - 4:30 p.m.]
- Check-in desk at any clinic
- Online at www.myhealth.va.gov
- Automated appointment line: 877-646-4550

MEDICATION REFILL

Ways to request a refill:

- Request a refill when you come in for your visit
- Medication Refill Line: 1-877-646-4550 or 407-646-4500 [24 hours/day; 7 days/week]
- Come to the VA pharmacy to pick up a refill
- Online at www.myhealth.va.gov
- TeleCare – choose option 2 [8:00 a.m. - 4:30 p.m.]

- **You should NEVER be without warfarin because you "ran out".** You may always come to the VA for a partial supply if you are going to be out of warfarin before your next refill comes in the mail.

**Please allow pharmacy at least 2 weeks to receive your refill in the mail or come to the pharmacy to pick up refill if needed sooner **

What is warfarin and how does warfarin work?

- Warfarin is an anticoagulant, sometimes called a "blood thinner" but it does not really change the thickness of your blood.
- Warfarin works by increasing the time it takes for your blood to form a clot.
- It will not destroy clots that have already formed but it will prevent new clots from forming and it also helps to stop any clots you already have from getting bigger.

Indication for therapy

You may be prescribed warfarin if you have:

- **Atrial Fibrillation (AF)**
  - **Irregular heart beat that increases the risk of blood clots and stroke**
- **Arteriosclerosis**
- **Heart Disease**

Or if you have had:

- **Heart surgery, including angioplasty with stenting or an artificial heart valve**
- **Stroke**
- **Deep Vein Thrombosis (DVT) or blood clots in your veins**
- **Pulmonary Embolism (PE) or blood clots in the lungs**
- **Joint replacement surgery**
- **Hypercoagulable state (genetic, cancer, surgery, etc)**

The length of time you must take warfarin depends on the reason you are being treated and your own risk factors. Most people with long-term diseases like atrial fibrillation or a history of strokes may need to take an anticoagulant for the rest of their lives.

What does it look like? The color tells you the dose

Warfarin 1 mg	Warfarin 2 mg	Warfarin 2.5 mg	Warfarin 3 mg	Warfarin 4 mg	Warfarin 5 mg	Warfarin 6 mg
Pink	Lavender	Green	Tan	Blue	Peach	Teal

Warfarin 7.5 mg	Warfarin 10 mg
Yellow	White

Coumadin® is the brand name and warfarin is the generic name

****You should NOT alternate between generic and brand****

Your INR Goal

- International Normalized Ratio or INR, is a test that measures the amount of time it takes for your blood to clot.
- In the first few weeks after starting warfarin therapy, you will be tested more often.
- You will get an INR blood test regularly to ensure your warfarin is working safely. Even after you reach your goal, we will continue monitoring your INR level at least every 6 weeks or more often if needed.
- **Based on the INR results, your healthcare provider may adjust your dose if needed to ensure the medication is working as intended.**
- **It is very important to reach and maintain a safe INR.**
- **Your goal INR range depends on why you are taking warfarin** (usually 2.0-3.0 or 2.5-3.5).

INR above the target range
- Too much warfarin
- Bleeding side effects more likely

Target INR: _____

INR below the target range
- Not enough warfarin
- Blood clots more likely

Taking Warfarin Safely

- **Take warfarin exactly as prescribed by your health care provider**
  - Same time everyday
    Usually in the evening
  - Use a pill box and dosing reminder sheet
  - Use a medication calendar
  - Reminders
    Phone alerts
    Family members/caregivers
- What dose will you take?
  - The amount of warfarin that each person needs is different. This amount may also change over time.
- Medication storage
  - Room temperature and avoid sunlight

Do NOT stop taking warfarin therapy on your own.

Do not run out of medication. Plan ahead for situations like a vacation.

What if I miss a dose?

- If you miss a dose and it is *within* 12 hours of the time you usually take your dose, go ahead and take your dose
- If *after* 12 hours, skip the dose you missed and continue your normal dosing schedule
- **DO NOT** double up or change your dose to make up for the missed dose

What can affect my warfarin?

1. Medications
2. Dietary Supplements
3. Diet
4. Illness
5. Exercise
6. Tobacco and alcohol

- **Report use of all medications, vitamins, supplements, and herbal products to your doctor and pharmacist**
- **Ensure VA medication list is accurate at every visit**
- **There are multiple prescription medications, especially antibiotics, which interact with warfarin**
- **This interaction list is not exhaustive. It is very important that you tell the clinic about any and all changes in your health and lifestyle**

cont.

OTC Medications

AVOID

- Vitamins: C, A, K, E
- Cough medications
- Aspirin and aspirin like products
  - PeptoBismol®, Alka Seltzer®
  - DO NOT take aspirin unless it is prescribed by your doctor.
- NSAIDS
  - Ibuprofen (Advil®, Motrin®)
  - Naproxen (Aleve®)
- Herbals, vitamins, supplements
  - Co-enzyme Q10, green tea, St. John's Wort, aloe, black cohosh, chamomile, fenugreek, fish oil, garlic, ginger, ginkgo biloba, ginseng, horseradish, licorice, onion, parsley, tumeric

You **MAY** take these non-prescription medications:

- Benylin Cough Syrup®, Chlor-Trimeton®, Contac®, Drixoril®, Maalox®, Mylanta®, Robitussin Cough Syrup®, Sudafed®, Tylenol Cold and Sinus®.
- Note: if you use antacids, such as Maalox® or Mylanta®, take them at least 2 hours before or 2 hours after taking your warfarin.
- If you need a medication for mild pain relief, you may use acetaminophen (Tylenol). **Please limit the amount of acetaminophen you use to NOT more than 2000 mg per day.**

- Warfarin should NOT be taken during pregnancy, as it can be harmful to the unborn, developing baby.
- Female patients of childbearing age who must take warfarin should use two forms of reliable birth control to prevent pregnancy.
- If you are a female patient, please notify your provider IMMEDIATELY if you plan to try to get pregnant or think you may be pregnant.

Tell others…

- Alert doctor, pharmacist, and surgeon that you take an anticoagulant **before any procedure is scheduled**
- Talk to all your health care providers including your dentist before you have an appointment and tell them you are taking warfarin
- If they tell you to stop your warfarin for a few days, before this appointment, make sure you **confirm** this plan with Orlando VA Anticoagulation Clinic

Changes in your health and activity levels can increase your INR

- Frequent and excessive diarrhea or vomiting
- Fever
- Significant weight change
- Recent cold/flu
- Significant changes in diet (especially vitamin K food)
- Decreases in activity or exercise level

Please notify the Anticoagulation Clinic if the following occur:

- If you are instructed to stop or hold warfarin for any reason (surgery/procedure/bleeding).
- If you are admitted to a hospital and a doctor has changed your warfarin dose.
- If you become sick and have vomiting, diarrhea, or if you are not able to eat.
- If you are prescribed any new medications or start new supplements or over the counter medications.
- If you have upcoming travel plans.
- If you notice any unusual signs of bruising or bleeding.

Warfarin and Food

- Vitamin K helps your blood to clot; therefore, eating too much or too little can affect how well your warfarin works.
- **If** you eat more vitamin K one day and less the next day, it may be very difficult to control the amount of time it takes for your blood to clot, the main goal of warfarin therapy.
- You can continue to enjoy foods like broccoli and lettuce, **just be consistent** with how much vitamin K you eat.
- If you **cannot be consistent**, then it is recommended to **avoid** foods that are high in vitamin K.

Foods high in vitamin K reverse the action of warfarin

Decrease INR – Increase risk of clotting

- Liver and liverwurst (AVOID)
- Green, leafy vegetables
  - Kale
  - Spinach
  - Collard greens
  - Broccoli
  - Brussels sprouts
  - Cabbage
  - Scallions
- Large amounts of mayonnaise and some cooking oils (soybean, canola, olive)
- Tea (green, dried leaves)
- Dietary supplements
  - Boost®, Ensure®, Carnation Instant Breakfast®, Power Bar®, Slim Fast®

Increase risk of bleeding

Increase INR

- Cranberry, grapefruit, pomegranate and their juices

What does a "consistent" diet mean?

A consistent diet means that on a weekly basis, you eat roughly the same amount of vitamin K-rich foods.

Smoking and Alcohol

- Smoking tobacco can decrease your INR and increase your risk of clotting
- Smoking marijuana may increase your INR and increase your risk of bleeding
- Alcohol can increase your INR and increase your risk of bleeding and falls
  - Men: limit to 2 drinks/day
  - Women: limit to 1 drink/day

One drink= 5 ounces of wine
12 ounces of beer
1.5 ounces of liquor

Vitamin K Content of Foods

High Vitamin K Foods (more than 100 mcg)

Food	Serving	mcg	Food	Serving	mcg
Broccoli	1/2 cup	110	Greens, turnip, frozen	1/2 cup	425
Brussels sprouts	1/2 cup	150	Kale, fresh or frozen	1/2 cup	550
Endive, raw	1 cup	116	Kale, raw	1/2 cup	274
Greens, beet	1/2 cup	350	Onions, green or scallion	1/2 cup	103
Greens, collard	1/2 cup	418	Parsley, raw	10 sprigs	164
Greens, collard, frozen	1/2 cup	530	Spinach	1/2 cup	444
Greens, mustard	1/2 cup	210	Spinach, raw	1 cup	145
Greens, turnip	1/2 cup	265	Swiss chard	1/2 cup	287

Moderate Vitamin K Foods (25-100 mcg)

Food	Serving	mcg	Food	Serving	mcg
Asparagus	5 spears	38	Lettuce, green leaf	1 cup	97
Asparagus, frozen	1/2 cup	72	Lettuce, romaine	1 cup	57
Broccoli, raw	1/2 cup	45	Noodles, spinach	1/2 cup	81
Cabbage, coleslaw	1/2 cup	37	Okra, frozen	1/2 cup	44
Cabbage, green	1/2 cup	82	Prunes, dried	5 each	25
Dried peas, black-eyed	1/2 cup	32	Tuna, light, canned in oil	3 oz.	37
Kiwi fruit	1 medium	31	Watercress, raw	1 cup	85

Important Things to Remember:

- Pay attention to serving sizes. If you eat more than one serving of a moderate vitamin K food, it may equal one high vitamin K food.
- Unless otherwise noted, all foods are cooked; meat is roasted, fish is cooked with dry heat, vegetables are cooked from fresh, and fruit is raw
- The actual values of foods listed can vary depending on how the food was processed. For example, vegetables that are cooked from frozen may have a higher vitamin K amount.
- Keep your vitamin K intake the same each week. Any changes in your diet should be discussed with your doctor and pharmacist.

06/2009 Academy of Nutrition and Dietetics. Nutrition Care Manual™. Vitamin K Content of Foods.
http://nutritioncaremanual.org/files/VitaminKContentofFoods.final.pdf
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Low Vitamin K Foods (less than 25 mcg)

Food	Serving	mcg	Food	Serving	mcg
Artichoke	1 medium	18	Nuts, pine, cashews	1 oz.	15
Avocado, raw	1 oz.	6	Oil, olive	1 tbsp	8
Beans, green or yellow	1/2 cup	10	Oil, soybean, canola, salad type	1 tbsp	10-25
Blackberries or blueberries	1/2 cup	14	Papaya	1 medium	8
Cabbage, raw	1/2 cup	21	Parsley, dried	1 tbsp	18
Carrots and carrot juice	1/2 cup	11-18	Pear	1 medium	8
Cauliflower	1/2 cup	9	Peas, green	1/2 cup	19
Celery, raw	1/2 cup	18	Pickles, dill or kosher	1 spear	14
Cucumber, with peel	1/2 cup	9	Salad dressings	1 tbsp	15
Dried beans and peas, most types	1/2 cup	5-9	Sauerkraut	1/2 cup	16
Grapes	1/2 cup	12	Seeds, pumpkin	1 oz.	13
Lettuce, iceberg	1 cup	13	Soy beans	1/2 cup	16
Mango	1 medium	9	Soy milk	1 cup	7
Margarine-blend, tub or stick	1 tbsp	13-15	Tomato, raw	1 medium	10
Mayonnaise	1 tbsp	6	Tomato sauce: spaghetti, marinara, or paste	1/2 cup	17

Vitamin K Free Foods (less than 5 mcg)

Food	Serving	Food	Serving
Bread and cereal products	1 oz. or 1/2 cup	Fruit: whole, canned, or juice, not listed elsewhere	1 each or 1/2 cup
Cheese, all types	1 oz.	Nuts, not listed elsewhere	1 oz.
Eggs	1 large	Seeds, sunflower	2 tbsp
Fish and shellfish not listed elsewhere	3 oz.	Vegetables, and vegetable juice not listed elsewhere	1/2 cup
Meat and poultry, all types	1 oz.	Milk and dairy products, all type	1 cup (8 oz.)

Warfarin and possible side effects

Call your healthcare provider if you notice:

- Appearance of unexplained bruises or pinpoint red spots on skin without any apparent injury to area.
- Unusual bleeding from hemorrhoids.
- Bleeding for a long time after minor cuts.
- Abnormal or excessive menstrual flow (twice normal).
- Change in the color or temperature of your skin, or if you develop strange sores.

Call 911 if you experience:

- Vomiting or coughing up blood.
- Bright red, pink or dark brown urine.
- Bright red or black "tarry" stools.
- Severe headache, dizziness.
- Severe pain, swelling, or discomfort in the stomach, abdomen, or joints.
- New or worsening nosebleeds.
- Unusual bleeding of any kind.
- Any bleeding that does not stop or is very heavy.
- If you experience a motor vehicle accident, a serious fall or head injury.

Your healthcare provider may be able to adjust your dose or change your medication to help reduce your side effects. If you experience severe bleeding, your healthcare provider can give you vitamin K, which reverses warfarin.

What are the signs of a blood clot to watch for?

- **Deep vein thrombosis (clot in arm or leg)**
  - Pain, redness, warmth, and/or swelling in your arms or legs
- **Pulmonary embolism (clot in lungs)**
  - Chest pain
  - Shortness of breath
  - Difficulty breathing
- **Stroke**
  - Blurry vision
  - Slurred or garbled speech
  - Facial drooping
  - One-sided weakness, numbness and/or tingling
  - Confusion
  - Sudden severe headache

> **"Learn to recognize a stroke, because time lost is brain lost!"**
> ~American Stroke Association

If you experience any symptoms of a stroke or clot in your lung, call 911 immediately

Preventing injuries while taking warfarin

To prevent bleeding problems and avoid situations that can lead to your injury:

- Use an electric razor instead of a blade/manual razor
- Avoid sharp objects
- Wear shoes and slippers at all times
- Avoid falls
- Physical activities that are usually safe include walking, jogging, swimming, and gardening
- Avoid sports or activities that have a high risk of injury
- Avoid vigorous nose blowing and tooth brushing
- Avoid use of water-jet tooth cleaners

If you cut yourself, apply pressure until the bleeding stops. If the bleeding does not stop after 10 minutes, keep applying pressure to the injury and go to the emergency department or call 911

Warfarin Facts to Remember

1. Warfarin is an anticoagulant. It helps keep clots from forming in the blood.
2. Warfarin and Coumadin® are the same medicine. They should NOT be taken together.
3. Take warfarin at the same time every day.
4. Seek medical attention:
   - If you have a cut that will not stop bleeding.
   - If you are bruising more easily.
   - If you are having signs/symptoms of a clot or stroke.
5. Tell your anticoagulation pharmacist when:
   - You begin, take a different amount, or stop taking a prescription or over-the-counter medication, vitamin/mineral, or herbal supplement.
   - You intend to stop, or have stopped, taking warfarin.
   - You are thinking about becoming pregnant or you think you may be pregnant.
   - You are scheduled for an upcoming procedure or surgery. Give at least 7 days' notice.
   - You miss a dose of warfarin.
   - You are planning to travel.
   - You are unable to have your next test on the scheduled date.
6. Remain on the same warfarin dose unless instructed by your doctor or Anticoagulation Clinic to change or stop.
7. Alert any health care professional that you are taking warfarin.

YOUR RESPONSABILITIES AS A PATIENT

- Maintain a consistent lifestyle.
- Have your INR checked regularly and participate in your healthcare.
- Wear Medic Alert bracelet or necklace and carry warfarin ID Card in wallet.
- Complete a data collection form at each and every warfarin test.
    - It is vitally important that this form is completed fully each time you have your test, as it allows you to communicate information that will help our Anticoagulation Clinic pharmacists manage your warfarin more effectively. This form should NOT be used to communicate urgent or severe symptoms.
- Maintain an adequate supply of warfarin tablets.
- Provide us with a working contact phone number at all times.
- Record your test result, dose instructions, and next test date on the pages provided at the end of this book.

VA | U.S. Department of Veterans Affairs

FIND MORE ONLINE AT
HTTP://WWW.ORLANDO.VA.GOV/SERVICES/PHARMACY.ASP
MY HEALTHEVET HTTPS://WWW.MYHEALTH.VA.GOV/

INR Monitoring Logbook

Week beginning (date)	Recommended Warfarin Dose							Date of test	INR result	Next appointment/ Comments
	Mon	Tue	Wed	Thur	Fri	Sat	Sun			

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