

Warfarin is an anticoagulant that slows down blood clotting to prevent blood clots from developing or getting worse. An old name for warfarin is Coumadin.

Why am I taking warfarin?

- To prevent blood clots from developing around your mechanical heart valve or in your heart.
- To prevent or treat an abnormal blood clot in the legs or lungs.
- To prevent stroke due to atrial fibrillation (irregular heart beat).

How long do I need to take warfarin?

- You have been prescribed warfarin for: _____
- Lifelong—involves balancing your risk of blood clots and your risk of bleeding.

How do I take warfarin?

- Take the dose of warfarin as instructed once a day (recommend suppertime). It can be taken before or after food. Try to be as consistent as possible.
- If you forget to take your dose and you remember before midnight, take that day's dose. If it is after midnight, wait until the next day and take the next prescribed dose. **DO NOT** take a double dose.
- Let AMS know if you miss a dose as this may affect your INR.
- Your dose may change based on the results of your INR blood test.

What is the INR Blood Test?

- The INR (International Normalized Ratio) is a measure of how fast your blood will clot. The AMS pharmacist will monitor your INR and tell you what dose of warfarin to take based on the result.
- INR testing is needed to make sure warfarin is working safely and properly.
- When starting to take warfarin, you need to have INR testing more often. Once your INR is stable, you will need fewer follow-up tests.
- Book your appointment for an INR test or go to the laboratory for your INR on the day you are instructed. You do not need to fast before your blood test. You can go to any SHA affiliated laboratory.
- We recommend you get your INR **before 11:00 a.m.** so your result is available to adjust your warfarin dose that same day.
- The AMS pharmacist will contact you by phone, either that afternoon or the next day, to tell you the INR result and the dose of warfarin you should take until your next blood test.
- Write down the INR and the dose in a calendar, day-planner or your smart phone.
Note: There are also phone apps available to help you keep track.
- Your INR target is _____ to _____.



What are the side effects of warfarin?

- The major side effect of warfarin is bleeding.
- If your INR is **HIGH** (i.e., result of too much warfarin), you have an **increased risk of bleeding**.
 - **Minor Bleeding:** you may notice these symptoms from time to time. If you are unsure if the bleeding is serious, call the AMS pharmacist.
 - ⇒ Gum bleeding while brushing teeth
 - ⇒ Occasional nose bleed
 - ⇒ Easy bruising
 - ⇒ Bleeding after minor cuts that last longer than usual
 - ⇒ Menstrual bleeding that lasts longer than usual



- **Major Bleeding:** notify your doctor right away, or go to the nearest Emergency Department of the nearest hospital if you have any of these symptoms.
 - ⇒ Blood in urine or stool
 - ⇒ Black, tarry stools
 - ⇒ Coughing or vomiting blood
 - ⇒ Sudden, severe headache (can be a symptom of a stroke, or a type of bleeding in the brain)
 - ⇒ Severe bleeding into whites of eyes (may not be an emergency, but should be examined by a doctor as soon as possible)
 - ⇒ Any bleeding that continues, or seems to be a lot of blood

What is the risk if the INR drops below my target?

- If your INR is **LOW** (i.e., result of too little warfarin), you have an **increased risk of developing a clot**.



- Symptoms of a blood clot:
 - ⇒ Severe pain, swelling with redness in the arms or legs
 - ⇒ Shortness of breath or chest pain
- Symptoms of a stroke or Transient Ischemic Attack (TIA):
 - ⇒ Weakness – sudden weakness, numbness or tingling in the face, arm or leg
 - ⇒ Vision problems – sudden loss of vision, particularly in one eye, or double vision
 - ⇒ Trouble speaking – sudden temporary loss of speech or trouble understanding speech
 - ⇒ Dizziness – sudden loss of balance, especially with any of the other signs above

Potential role of low molecular weight heparin:

- You may need to obtain and administer an injectable anticoagulant when your INR is low to prevent blood clots.

Many things can affect warfarin, such as:

- Diet
 - ⇒ Vitamin K in food and supplements
 - ⇒ Alcohol (more than 1 to 2 drinks per day, a few times a week)
- Physical activity
- Medications
 - ⇒ Prescription
 - ⇒ Non-prescription
 - ⇒ Herbal products
- Illness
 - ⇒ Changes in long-standing medical conditions
 - ⇒ Fever, diarrhea, vomiting
- Dosing errors
 - ⇒ Missing a dose
 - ⇒ Taking the wrong dose



The AMS pharmacists will ask you questions about these things when reviewing your INR results to help adjust your warfarin dose and schedule your next bloodwork.

The value of carrying something identifying that you take warfarin.

- Carrying identification (example: medical alert bracelet or wallet card) lets emergency healthcare providers know that you are taking a blood thinner (anticoagulant).
- This alerts and helps healthcare providers evaluate how your medicine might interact with other treatments and your risk of bleeding when giving you care, in the event you are not able to communicate that to them.
- It is important that all your doctors and caregivers know you are taking warfarin in case you need surgery or dental work, since it could make you bleed more easily.

Females who are of childbearing potential (who can become pregnant):

- Contact AMS and your doctor if you plan to become or become pregnant while taking warfarin.
- Warfarin is safe to take while breastfeeding. Let AMS know when you start or stop breastfeeding.

