



AGNESIAN
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Warfarin

EDUCATION HANDBOOK

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Important Message

In order to provide you with the safest and most effective therapy, your health care provider needs you to act as a partner in your care. Your role is to gain the necessary knowledge about your anticoagulation therapy, the factors that impact it and then apply this knowledge to your daily activities.

Warfarin Coumadin® is a high risk medication; however, it is safe and effective when taken as prescribed and lab work is performed to monitor therapy. High risk medications have a greater chance of causing injury or harm if not managed with your team. It is important to take your warfarin daily as prescribed and **keep all follow-up appointments**.

Always update your health care providers with any changes in your health or medications that you are taking. This is very important because there are many medications that interact with warfarin, which could change how the medication works. Always update Anticoagulation Management Services (AMS) with any change in your medications or change in your health. Please do not assume your health care provider has made the AMS clinic aware of any health or medication changes. It is your responsibility to call and notify AMS.

Do not hesitate to call with any questions, concerns or updates. AMS is available seven days a week by appointment. Please leave a message with non-urgent issues.

Ripon Medical Center Anticoagulation Management Services

(920) 745-3320

St. Agnes Hospital Anticoagulation Management Services

(920) 926-4580

Waupun Memorial Hospital Anticoagulation Management Services

(920) 324-8444

What is Anticoagulation Services (AMS)?

AMS is an appointment-based clinic. Your appointments will be scheduled with your input. AMS clinic monitors your blood clotting by doing a finger poke. They can also give injections for blood clotting as needed, develop plans to transition your treatment for surgery or procedures and refill your warfarin.

Name: _____
Reason for warfarin: _____
Goal range: _____
Length of therapy: _____

What is Anticoagulation Therapy?

An anticoagulant is a medication that changes the blood clotting process. Common oral anticoagulants include warfarin (Coumadin®), aspirin, dabigatran (Pradaxa®), rivaroxaban (Xarelto®), apixaban (Eliquis®) and clopidogrel (Plavix®). Common injectable anticoagulants include dalteparin (Fragmin®), enoxaparin (Lovenox®), fondaparinux (Arixtra®) and heparin.

What is Warfarin (Coumadin®)?

Warfarin is a medication that changes the blood's ability to make a blood clot and the time it takes to stop bleeding. Warfarin is not a "blood thinner," but rather, it changes the time it takes to make a blood clot.

Where Did Warfarin Come From?

Warfarin was first discovered in 1939 after numerous cattle had bleeding issues in North Dakota and Canada after eating common varieties of sweet clover. Further investigation led to the discovery of warfarin, which was first used as rat poison in the 1940s. Investigators began experimenting with warfarin in humans in the 1950s, but its widespread use did not occur until it was used to treat President Dwight D. Eisenhower after a heart attack in the mid 1950s. Subsequently, warfarin sodium (derived by the Wisconsin Alumni Research Foundation which held the original patent on warfarin) rapidly became the major oral anticoagulant used in the United States and throughout North America.

Why is Warfarin Prescribed?

Warfarin is used when you have a condition that increases the risk of blood clots. Anticoagulant or antiplatelet therapy medications, such as warfarin (Coumadin®) or aspirin, reduce the risk of blood clots and stroke by decreasing your blood's ability to clot. While they don't break up existing blood clots, they can prevent clots from getting bigger or reduce your risk of developing additional clots. The body dissolves most clots with time.

What are the Side Effects of Warfarin?

Side effects from warfarin may occur from time to time. If you notice anything abnormal that you believe may be caused by the medication, call your health care provider.

Two types of side effects that sometimes occur are concerns with bleeding and allergic reaction.

Symptoms of **minor bleeding** include:

- Gum bleeding while brushing teeth
- Occasional nosebleed
- Easy bruising
- Bleeding after a minor cut that stops within a few minutes
- Menstrual bleeding that is a little heavier than normal

If you have minor bleeding that does not stop, contact your health care provider, go to the emergency department or call 911.

Symptoms of **major bleeding** include:

- Dark brown or red urine
- Bowel movements containing blood or very dark, tar-like stool
- Excessive bleeding from the gums or nose
- Throwing up coffee-colored, bright red or red-tinged secretions
- Severe pain - new or worsening (headache or stomachache)
- Dizziness/weakness more than usual
- Bleeding from a cut that will not stop
- Sudden appearance of bruises for no known reason
- Excessive menstrual bleeding
- Pain, discomfort or swelling in any area, especially after an injury

If you have major bleeding, contact your health care provider, go to the emergency department or call 911 right away. These are signs that your INR may be high.

The chance of bleeding increases with increasing INR. Keeping your INR within your target range will reduce your risk of bleeding.

In rare cases, warfarin can cause an allergic reaction. Get help right away if you have an allergic reaction.

Symptoms of an **allergic reaction** may include:

- Difficulty breathing
- Swelling of your throat, tongue or face
- Hives and/or a rash
- Itching

Warfarin can also cause skin death, which can cause dark red or black areas on the skin. This is a rare complication that may occur during the first several days of warfarin therapy. If either of these conditions occur, contact your health care provider, go to the emergency department or call 911 right away.

Common Reasons For Using Warfarin:

- **Atrial Fibrillation**

Atrial fibrillation, often referred to as “Afib,” is an irregular heartbeat, a rapid heartbeat or a quivering of the upper chambers of the heart, which are called the atria. Atrial fibrillation is due to a malfunction in the heart’s electrical system. It is the most common heart irregularity, or cardiac arrhythmia. It can interrupt the normal flow of blood through the heart, allowing clots to form. These clots can potentially travel through the arteries, lodge in the brain and cause strokes. Warfarin reduces the risk of strokes, but does not treat the irregular heart rhythm.

- **Deep Vein Thrombosis (DVT)**

Deep Vein Thrombosis, or DVT, is a blood clot that forms in a vein deep in the body. Blood clots occur when blood thickens and clumps together. Most deep vein blood clots occur in the lower leg or thigh, but they also can occur in other parts of the body.

- **Pulmonary Embolism (PE)**

A blood clot in a deep vein can break off and travel through the bloodstream. The loose clot is called an embolus. When the clot travels to the lungs and blocks the main artery of the lung or one of its branches, the condition is called pulmonary embolism. A pulmonary embolism is a very serious condition. It can damage the lungs and other organs in the body and cause death.

- **Aortic or Mitral Mechanical Heart Valve**

An artificial heart valve is a device implanted in the heart of a patient with heart valvular disease. Blood that flows between different chambers of your heart, or out of your heart into large arteries, must flow through a heart valve. These valves open up enough so that blood can flow through. They then close, keeping blood from flowing backwards.

There are four valves in your heart. These include the aortic valve, mitral valve, tricuspid valve and pulmonary valve. When one of the four heart valves malfunctions, the medical choice may be to replace the natural valve with an artificial valve. Blood clots on mechanical valves can cause the valve to “stick.” Blood clots on the replacement valve can also fall off the valve and enter the bloodstream. This can cause blockage of blood flow anywhere in the body, including the brain, where it can cause a stroke. Warfarin is given to prevent clots from forming on the mechanical valves.

- **Stroke**

A stroke occurs when a blood clot blocks the blood flow in a vessel or artery, or when a blood vessel breaks, interrupting blood flow to an area of the brain. When either of these things happens, brain cells begin to die. When brain cells die during a stroke, abilities controlled by that area of the brain are lost. After emergency treatment for stroke, when your condition has stabilized, treatment focuses on rehabilitation and preventing another stroke. Warfarin may be given after the initial treatment for stroke to prevent strokes caused by blood clots.

- **Heart Attack**

Myocardial infarction (MI) or acute myocardial infarction (AMI), commonly known as a heart attack, occurs when the blood supply to part of the heart muscle, the myocardium, is severely reduced or stopped. Blood carries oxygen to the heart. Without oxygen, part of the heart can die and not work properly.

- **To Reduce the Risk of Blood Clots after Surgery**

People who have had recent surgery are at a higher risk to develop blood clots, especially if they are on bedrest or become inactive following surgery. Not moving around enough can slow blood flow and cause blood to not move in the veins of the legs. When blood doesn't move, it starts to clot. Stress, such as from surgery or injury, as well as mild dehydration, can cause the blood in these pools to clot more easily.

- **Other Reasons**

There are other less common reasons patients may be on warfarin. One example is patients who have a genetic condition that causes blood clots. Please discuss the reason that you are on warfarin with your health care provider if you have any questions.

How Long Do I Have to be on Warfarin?

For some conditions, it may be only weeks or months. In many cases however, it is a lifelong medication. You should never stop taking this medication without discussing it with your healthcare provider first. How long you are on Warfarin will be determined by your health care provider and you.

What Does Warfarin Look Like?

Whether you have brand or generic warfarin, the color of the tablet should be the same for a given strength (milligrams or mg). The shape and size may vary from one manufacturer to another. For example, if you use warfarin 1mg tablets, then the color should be pink. If the color of your warfarin changes, but you were not prescribed a different strength of warfarin tablets, contact your pharmacy before taking a dose. The number (mg) is also imprinted on the pill.

Tablet Strength..... Color	Refills
-----------------------------------	----------------

1mg.....	Pink
2mg.....	Light Purple
2.5mg.....	Green
3mg.....	Brown
4mg.....	Light Blue
5mg.....	Peach
6mg.....	Teal
7.5mg	Yellow
10mg.....	White

All warfarin refills are done by the AMS clinic, not your provider. Please contact us when four to seven doses are left for a refill. Also, contact us at least a week **before** travel.

What is a Usual Dose of Warfarin?

There is no “usual dose” of warfarin. The warfarin dose is very different for each patient who takes warfarin. The dose may change depending on the results from a lab test used to see if the warfarin is working.

Can Warfarin Tablets be Split?

Yes, warfarin tablets may be split. Sometimes the dose of warfarin may change and you may need to use half tablets to get the proper dose.

What Time Do I Take Warfarin?

It is best to take warfarin at the same time each day. Generally, it is recommended to take warfarin in the evening. This will allow your health care provider to make a change in your dose based on your blood test.

Can I Take My Warfarin With Food?

It is ok to take warfarin with or without food. The best way to take warfarin is the same way each day either with or without food.

What Happens if I Miss a Dose?

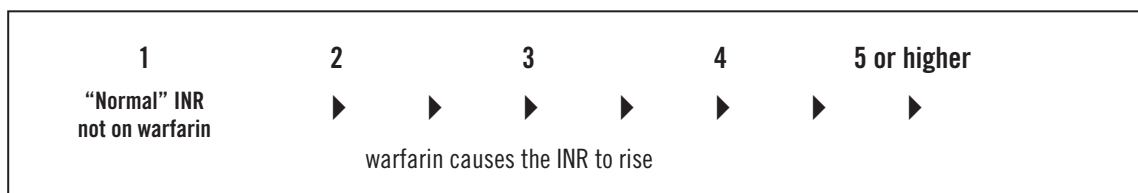
It is okay to take your dose a little late. If you wake up the next day and realize that you have missed a dose, it is NOT ok to double up on your dose. If you miss your dose and it is the next day, simply take the prescribed dose for that day. Make sure to notify your anticoagulation therapy provider if you miss a dose.

How Long Does it Take For Warfarin to Start or Stop Working?

Warfarin begins to reduce blood clotting within 24 hours after taking the drug. The full effect may take 72 to 96 hours to occur. The anti-clotting effects of a single dose of warfarin lasts two to five days, but it is important for you to take your dose as prescribed by your health care provider.

How Do I know How Warfarin is Working? What is an INR?

Warfarin is monitored with a lab test called the International Normalized Ratio (INR). INR can also be called a protime (PT). INRs are used to determine the correct dose of warfarin to give. Your INR should be near one if you are not taking warfarin. Your INR will rise when the warfarin is working. The higher the number, the longer it takes to stop bleeding or make a blood clot. This is why it is important to regularly attend AMS appointments.



How Often Do I Have to Get My INR Measured?

At the beginning of therapy, INRs are measured frequently because INRs are used to determine the correct dose of warfarin. If you are getting injections while you are starting on warfarin, then the INR will be measured more often. Once the dose of warfarin is known, then the INR needs to be checked minimally every four weeks unless dose adjustments are needed.

What is the Goal Range For My INR?

INR goal range depends on the reason for use. Goal ranges for INR can depend on many factors and is up to your health care provider.

What if My INR is Above My Goal Range?

The higher the INR means the longer it takes for the blood to make a blood clot. Your INR may go above your range for many reasons. Factors that increase an INR include: drug interactions, alcohol, changes in diet, taking too many warfarin tablets, feeling ill, not eating well or losing weight. It simply means that you need less warfarin than you were previously getting.

What if My INR is Below My Goal Range?

The lower the INR means that the blood is clotting too quickly and making a blood clot faster than your prescriber indicates. Your INR may go below your range for many reasons. Factors that decrease an INR include: missing a dose, changes in medications, eating more foods with increased vitamin K content or increased activity. It simply means that you need more warfarin than you were previously getting.

How Do I Keep My INR in Goal Range?

- Take the correct dose of warfarin at the same time each day.
- Have your INR checked regularly as scheduled.
- If you eat foods high in vitamin K, eat them consistently.
- Inform your healthcare provider and Anticoagulation Management Services of any changes in medications or health.

Food Interactions with Warfarin?

Foods containing vitamin K are known to decrease the effects of warfarin. If you eat foods with vitamin K it is important to eat a consistent amount of the listed foods because of the impact vitamin K may have on the warfarin. You do not have to avoid foods that have vitamin K, but you must have a consistent and regular amount of the below listed foods.

Vitamin K Content of Foods

Tips:

- 1) Eating more than the serving size for a moderate or low vitamin K food **can** make it a high vitamin K food.
- 2) Unless otherwise noted, all foods are cooked: meat is roasted, fish is cooked with dry heat and vegetables are cooked from fresh. Fruit is raw.
- 3) Values are rounded to the nearest whole number and may be averaged with similar foods in the group.

High Vitamin K (More than 100 mcg)

Food	Serving	Vitamin K (mcg)
Broccoli	½ cup	110
Brussels Sprouts	½ cup	109
Endive, raw	1 cup	116
Greens, beet	1 cup	350
Greens, collard	½ cup	418
Greens, collard, frozen	½ cup	530
Greens, mustard	½ cup	210
Greens, turnip	½ cup	265
Greens, turnip, frozen	½ cup	425
Kale, fresh or frozen	½ cup	531
Kale, raw	½ cup	274
Onions, green or scallion	½ cup	105
Parsley, raw	10 sprigs	164
Spinach, cooked	½ cup	444
Spinach, raw	1 cup	145
Swiss chard	½ cup	287

Moderate Vitamin K (25-100 mcg)

Food	Serving	Vitamin K (mcg)
Asparagus	5 spears	38
Asparagus, frozen	½ cup	72
BOOST	8 ounces	36
Broccoli, raw	½ cup	45
Cabbage	½ cup	37
Cabbage, green	½ cup	82
Coleslaw	¾ cup	100
Dried peas, black-eyed	½ cup	32
Kiwi fruit	1 medium	31
Lettuce, green leaf	1 cup	63

Lettuce, romaine	1 cup	57
Liver, beef	3.5 ounces	92
Liver, pork	3.5 ounces	25
Noodles, spinach	½ cup	81
Okra, frozen	½ cup	44
Prunes, dried	5 each	25
Rhubarb, cooked	1 cup	51
Watercress, raw	1 cup	85

Low Vitamin K (less than 25 mcg)

Food	Serving	Vitamin K (mcg)
Artichoke	1 medium	18
Avocado, raw	1 oz.	6
Beans, green or yellow	½ cup	10
Blackberries or blueberries	½ cup	14
Cabbage, raw	½ cup	21
Carrots	½ cup	11
Cauliflower, raw	½ cup	8
Celery, raw	½ cup	18
Cucumber, with peel	½ cup	9
Dried beans and peas, most types	½ cup	5-9
ENSURE	8 ounces	22
Grapes	½ cup	12
Lettuce, iceberg	1 cup	13
Mango	1 medium	9
Margarine - blend, tub or stick	1 Tbsp.	13-15
Mayonnaise	1 Tbsp.	6
Nuts - pine nuts, cashews	1 oz.	15
Oil, olive	1 Tbsp.	8
Oils - soybean, canola, salad-type	1 Tbsp.	10-25
Papaya	1 medium	8
Parsley, dried	1 Tbsp.	18
Pear	1 medium	8
Peas, green	½ cup	19
Pickles, dill or kosher	1 spear	14
Salad dressings	1 Tbsp.	15
Vitamin K - low foods cont.		
Sauerkraut	½ cup	16
Seeds, pumpkin	1 oz.	13
Soy milk	1 cup	7
Soybeans	½ cup	16

Tomato sauce: spaghetti, marinara, paste, V-8 or vegetable juice	½ cup	17
Tomato, raw	1 medium	10

Vitamin K Free (less than 5 mcg)

Food	Serving
Braunschweiger	1 slice of 2.5" x .25" thick
Bread and cereal products	1 oz. or ½ cup
Cheese, all types	1 oz.
Eggs	1 large
Fish and shellfish	3 oz.
Fruit: whole, canned or juice (not previously listed)	1 each or ½ cup
Meat and poultry, all types	1 oz.
Milk and dairy products, all types	1 cup
Nuts, not previously listed	1 oz.
Seeds, sunflower	2 Tbsp.
Vegetables and vegetable juice (not previously listed)	½ cup

What are Food and Beverage Interactions with Warfarin?

Alcohol in moderation (up to two drinks per day) will not dramatically impact the INR level. Amounts more than this will make the INR level go up because both the alcohol and the warfarin are broken down through the liver. This is a temporary and artificial elevation. It doesn't protect your heart, it just increases the risk for bleeding. If you have an issue with excessive alcohol intake and are taking warfarin, please speak with your healthcare provider. This lethal combination may place you at serious risk of a bleeding event.

The following drinks may alter you INR; therefore, be consistent or limit the amount: green tea, cranberry, pomegranate, mango or grapefruit juices.

The following foods may alter you INR; therefore, be consistent or limit the amount: cranberries, pomegranate, mango or grapefruit.

What are the Drug Interactions with Warfarin?

Other medicines can change the way warfarin works. Warfarin can also change the way your other medicines work. It is important to talk with your health care providers about all the medicines that you take, including other prescription medicines, over-the-counter medicines, vitamins and herbal products. Tell your healthcare provider when you start taking a new medication, when you stop taking a medicine or if the amount of medicine you are taking changes.

When you visit your health care providers, bring a list of current medicines, over-the-counter drugs, and any vitamins and herbal products you take. Let your health care provider know if you start or stop taking an oral multivitamin or change the brand. Each brand may have a different amount of vitamin K in it.

Please notify your provider and the Anticoagulation Management Service if you have been started on any antibiotics, chemotherapy or amiodarone as these medications can have significant interactions with warfarin.

What are the Herbal Medication and Other Medication Interactions with Warfarin?

Herbal medicines can also cause dangerous drug interactions with warfarin. Keep in mind that just because an herbal product is advertised to be “all natural” does not mean it is safe. If you want to take an herbal supplement, it is very important that you contact your health care provider and AMS clinic before taking it.

What Can Be Done if I Have a Major Bleed and/or Need an Emergency Procedure?

The vitamin K that is found in foods also comes in a tablet or can be given as a shot. Vitamin K can be used to decrease a high INR by helping blood to clot faster. Giving vitamin K will help the blood to return to “normal” meaning that the blood will be able to clot quickly just as it did before starting on warfarin therapy. This will help stop any serious bleeding that may occur or prepare the body if an emergency procedure is needed where bleeding can be a risk. Depending on how much you are bleeding, you may be given a vitamin k tablet or a shot to decrease a higher INR.

What to Do if You Have a Head Injury or Have a Serious Fall While Taking Warfarin?

If you experience a head injury or a serious fall while taking warfarin, you should contact your healthcare provider or go the emergency department right away. An injury to the head may be very serious and will need to be evaluated quickly.

What About Warfarin Use in Pregnancy?

Warfarin should be avoided in pregnancy because warfarin crosses the placenta and can lead to fetal abnormalities. Talk to your health care provider right away if you think you may be pregnant or trying to get pregnant.

What Do I Do if I am Traveling While on Warfarin?

- 1) Inform Anticoagulation Management Services (AMS) about any travel plans. Inform them where you will be going and for how long you will be gone for. Your therapy will dictate the next steps. You may be asked to:
 - a. Find a lab near where you are going that will accept an order from Agnesian HealthCare.
 - b. Have the lab processed and results faxed to us within 24 hours of getting the lab done.
 - c. Contact us for any new changes or dosages.
- 2) What if I cannot get a lab or will be gone for greater than 12 weeks?
 - a. For your safety, you may be referred back to your primary care provider to discuss other options for your anticoagulation care until you return.

- b. You are able to return to AMS when you come back with a new referral from your primary care provider.
 - c. If you have a provider at your destination, they may manage you while you are there.
- 3) What if I am travelling outside the United States?
- a. For your safety, you may be referred back to your primary care provider to discuss other options for your anticoagulation care until you return.
 - b. You are able to return to AMS when you come back with a new referral from your primary care provider.
 - c. If you have a provider at your destination, they may manage you while you are there.
- 4) How do I handle refills?
- a. Because warfarin is a high-risk drug, refills are done for a maximum of three months. Please let us know before travel if you would need a refill on your warfarin as we will be unable to send one where you are.

What if I Have a Procedure Scheduled When I am on Warfarin?

Bleeding from medical or dental procedures may be increased with warfarin. You should tell your primary care provider or dentist that you take warfarin well before any planned procedure (including operations in the hospital, minor outpatient surgery procedures or some dental work) so that your warfarin therapy is considered during the planning of your operation or procedure. This takes time to plan so please inform AMS as soon as possible. Your dose of warfarin may have to be lowered or stopped a few days before the procedure, and a different anticoagulant may need to be used. **If you are ever told to stop or decrease your warfarin by anyone other than the provider managing your warfarin, notify the AMS clinic right away.**

What is Bridge Therapy?

Bridge therapy is used for a patient who is at a high risk of clotting and needs to have the warfarin stopped for a period of time. This may be in preparation for a procedure, such as a surgery, endoscopy, colonoscopy or dental work. Normally the warfarin is stopped three to five days prior to the procedure and then re-started after the surgery. Stopping the warfarin will lower the INR and lower the risk of bleeding. In patients at very high risk of clotting, this time off warfarin may result in a blood clot. For this reason, bridge therapy is used.

In bridge therapy, the warfarin is stopped and when the INR drops below the ordered level, injections (usually low molecular weight heparin which may be more easily administered at home) are begun. The injection is stopped on the day of the procedure (or the day before depending upon the timing and the planned procedure) and then restarted later that day, or the next day. This lowers the risk the patient has of developing a blood clot while off warfarin and on injections until the warfarin is again in goal range.

What are Injections for Bridge Therapy?

Anticoagulant injections are given right below the skin. Examples are: dalteparin (Fragmin[®]), enoxaparin (Lovenox[®]) and fondaparinux (Arixtra[®]). The injections work immediately but don't last as long as warfarin. They do not impact the INR because it works on a different clotting process.

Things to Remember

DOs

- Do take your warfarin exactly as your health care provider tells you.
- Do get your blood tested when you are supposed to.
- Do use a calendar to record all of your warfarin doses and each INR result.
- Do tell your health care provider about all other medications you are taking. Talk to your health care provider BEFORE you change, start or stop any medicines (prescription or over-the-counter), supplements or herbal products.
- Do be consistent in your eating habits of vitamin K foods.
- Do tell your health care provider when you get sick or injured, or have bleeding that is more severe than you expect.
- Seek medical care right away if you injure your head.
- Do keep warfarin (and all other medications) out of the reach of children.
- Do tell your primary care provider if you are pregnant or are planning to get pregnant.
- Do tell all health care providers (e.g., physicians, dentists and pharmacists) that you are taking warfarin.
- Do refill your prescription BEFORE running out of warfarin. Try to refill four to seven days before your last dose.
- Do remember to take your warfarin (and other medications) when you travel.
- Do consider wearing a medic alert bracelet or carrying a wallet card that states that you are taking an oral anticoagulant.
- Do inform the AMS clinic of travel and discuss travel plans, dosing and labs you may need while gone.

DON'Ts

- Do NOT take warfarin if you are pregnant or plan to get pregnant without contacting your primary care provider.
- Do NOT change the dose of warfarin on your own.
- Do NOT stop warfarin on your own even if you feel well.
- Do NOT start or stop any other medicines without checking with your health care provider first.
- Do NOT make big changes in your diet, lifestyle or activities without first telling your healthcare provider.
- Do NOT participate in contact sports that may result in bleeding or bruising injuries. Take caution when performing activities that have an increased risk of bleeding.
- Do NOT drink too much alcohol. One to two drinks per day are generally OK unless you have been told not to drink alcohol. Never binge drink.
- Do NOT leave the country, state or area without travel plans, refills and labs discussed with our clinic.

Discharge from Services

Patients that do not come, no-show or repeatedly cancel/reschedule appointments may be discharged from AMS and referred back to your primary care provider for treatment. This may also occur if self-dosing.

