Guide to Warfarin Therapy

Treatment to Prevent Blood Clots
When Should I Call for Help?

Call 911:
- If you have a severe headache or other signs of stroke (see page 4).
- If you have chest pain, shortness of breath or other problems breathing.
- If you hit your head or have a serious injury.
- If you have bleeding that won’t stop (see page 5).

Call your care team (doctor, clinic or warfarin manager):
- Signs of a blood clot (see page 4)
- Less serious signs of bleeding (see page 5).
- If you have fallen, even if you aren’t hurt.
- Before taking new medicines, over-the-counter drugs or herbal products.
- When you have major changes in your diet.
- Two weeks before taking a trip.
- Two weeks before having surgery or dental work.
- If you get sick with a high fever, vomiting (throwing up), diarrhea (loose, watery stools) or infection.
- If you get pregnant (call right away).
- If your pills don’t look the same as usual, or the directions for taking them have changed.
- If you have any questions about taking warfarin.
Why am I taking warfarin?

You may have had a blood clot, or you may have a condition that puts you at risk for a clot, such as:

- **Atrial fibrillation (rapid and irregular heartbeat):** This may cause blood to pool in the heart chambers and form a clot. The clot may break free, travel to the brain and cause a stroke.

- **Deep vein thrombosis (blood clots in the leg, groin or arm):** These clots can block the flow of blood back to the heart. They are usually painful. A clot may break away and travel to another part of the body.

- **Heart valve replacement:** When a heart valve has been replaced, there’s a risk of a blood clot forming on the new valve. This clot may break free and travel to another part of the body.

- **Pulmonary embolism (blood clot in a blood vessel of the lung):** This can cause chest pain and breathing problems.

- **Cardiomyopathy (heart muscle gets weaker or larger):** The heart does not pump blood very well, and blood clots may form in the heart. If a clot breaks away, it may travel to another part of the body.

- **Joint replacement:** When you have a hip or knee joint replaced, your movement is limited while you heal. This increases the chances that a clot might form.

- **Other surgeries:** During bed rest, your risk of forming a clot increases. Your care team may prescribe warfarin for a limited time.

- **Other:** __________________________________________________________
  __________________________________________________________
  __________________________________________________________

A clot may stay where it is or travel through the blood and stay in another part of your body. Blood clots can lead to stroke, heart attack and other problems.

How warfarin works

Warfarin is sometimes called a “blood thinner” (though it doesn’t thin your blood). This drug can prevent new clots from forming and stops existing clots from growing larger. It can’t break up a blood clot.

The length of time you’re on warfarin depends on why you’re taking it. Treatment ranges from several weeks to lifelong.

How to take warfarin

Take warfarin as directed by your care team. The amount needed varies for each person.

- **Take it at the same time every day.** Choose a time that’s easy to remember. You may take it with or without food.

- **Track your doses.** Use a calendar or pillbox to keep track of your doses.

- **If you miss a dose:** Take it as soon as you remember. Don’t take more than two doses within 24 hours.
  - In your warfarin calendar, note the time of your missed dose and when you made it up.
  - Call your care team if you have questions.

- **Look at the tablets after you buy them.** Make sure the color and shape of the tablets are the same each time. If something changes, ask the pharmacist about it.

In the beginning, we may change your dose several times. It takes time to figure out the right dose for each person. Even after you’ve been on warfarin for some time, your dose may change.

You may be taking warfarin (generic name), Jantoven, Coumadin, Marevan or Waran (brand names). If you change types, your dose may also change.
Why blood tests are important

Regular blood tests (INR) are a vital part of your treatment. They tell us if we're giving you the correct amount of warfarin.

We will take a small sample of blood from your finger. Then, a machine will check how long it takes your blood to form a clot.

Your INR should be in this range: ___________. If it’s lower, you may be at greater risk for a blood clot. If it’s higher, you may be at greater risk for bleeding.

When you first start warfarin, your blood will be tested 1 or 2 times per week for several weeks. Then, tests will be done every 2 weeks until your numbers are stable. Once your INR is stable, you should be tested about once a month.

Later on, we may use other blood tests to check that we have the right dose.

Problems to watch for

Clotting

If your INR gets too low, your risk for blood clots will increase.

Call 911 or go to the emergency room for:

- Chest pain, shortness of breath or other problems breathing.
- Any signs of 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. This includes loss of balance or feeling dizzy.
  - Sudden severe headache for no reason.
  - Sudden fainting or seizures.

If you have other signs of a blood clot, call your care team right away:

- 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, or it could be black, blue or green.
**Bleeding**

Warfarin may cause you to bleed more easily. If your INR gets too high, your risk of bleeding will increase. Some signs of bleeding are easy to see, and others are not.

**Call 911 or go to the emergency room if:**

- You have a bad fall, hit your head or get a deep or severe cut.
- You can't control the bleeding from a small cut or injury after putting pressure on it.
- You're coughing or throwing up blood.
- You have red or black stools (bowel movements).
- You have red or orange urine (pee).
- You have nose bleeds that last 10 minutes or more.
- You have a sudden severe headache.

**Call your care team right away if you have:**

- Bleeding gums
- Large bruising for unknown reasons
- Pale skin
- Tiredness
- Periods that are heavier than normal, or unexpected bleeding from the vagina.

**How to prevent problems**

- Take your warfarin and get your blood tested. Your care team will tell you how often to get tested.
- Keep your diet consistent (see page 6).
- Use your calendar to track your warfarin doses and INR results.
- Follow the guidelines for travel, exercise, surgery and alcohol (see page 7).
- Watch for signs of bleeding or clotting.
- Carry or wear your medical ID.
- Call your care team if you:
  - Are adding or changing any medicines.
  - Have questions about how food or drugs interact with warfarin.
  - Have questions about bleeding or clotting.

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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 can't see it.

**If you have bleeding:** Put direct pressure on the area and call your care team. If the bleeding doesn't 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 can't reach your care team, go to the emergency room.)
Diet and vitamin K

Many foods and supplements contain vitamin K. Vitamin K helps your body form blood clots. An increase or decrease in vitamin K can change the way warfarin works.

Keep it steady

You don’t need to stop eating foods with vitamin K. But your intake of vitamin K should stay the same from week to week. Keep eating the foods you normally do. If you ate foods high in vitamin K before starting warfarin, keep eating them.

If you make any major changes in your diet, let your care team know. We may need to adjust your dose. Also, be sure to talk to us if you start or stop a weight-loss diet.

Foods high in vitamin K

Green leafy vegetables (such as spinach, Swiss chard and green leaf lettuce), broccoli, brussels sprouts and parsley are some of the foods high in vitamin K. The darker green a vegetable is, the higher the amount of vitamin K. You can get a list of foods high in vitamin K from your clinic, pharmacist or dietitian.

Other sources of vitamin K

Vitamin or mineral supplements may contain vitamin K. (For example, Viactiv calcium tablets contain vitamin K.) Read the product labels. If you’re unsure if a product has vitamin K, check with your care team.

Other drugs and warfarin

Many medicines can change how warfarin works. It isn’t possible to know them all. To be sure that you receive the best drug therapy, follow these steps:

1. Tell your care team when you start or stop any medicine (prescribed or over-the-counter, including herbal products).

2. Tell all of your care providers (including your dentist) that you take warfarin. This will help them choose medicines that won’t affect warfarin.

3. Get all your medicines at the same pharmacy. The pharmacist can check if your drugs might interact.

4. If you have questions about a new medicine, call your care team.

Aspirin

Don’t take aspirin unless your care team says it’s okay. Note that some drug-store products contain aspirin (such as Pepto-Bismol and Kaopectate). Read the labels. Ask your care team before taking any product that has:

Aspirin
Acetylsalicylic acid
Salicylic acid
Salicylate

Advil and Aleve

It is best to avoid Advil, Motrin (ibuprofen) and Aleve (naproxen), since they may increase the risk of bleeding.

For pain relief, you make take Tylenol (acetaminophen). Tell your care team if you’re taking more than 2000 mg per day. Larger doses may interact with warfarin, and you may need your INR checked more often (see page 4).
**Herbal products**

Some herbs are known to affect warfarin or bleeding. These include ginkgo, garlic, ginseng, alfalfa and ginger. Many other herbs cause problems as well. Ask your care team before using any herbal products.

**Vitamins and supplements**

Some health products, such as vitamin E and fish oil, may raise the risk for bleeding. This could be a problem if you start a new product or change your dose while taking warfarin.

Be sure your care team knows about all products you are taking. Ask your care team before starting a new product or changing your dose.

**Surgery**

If you’re having surgery (medical or dental), tell your care team at least 2 weeks ahead of time. See the person who manages your warfarin 1 week before surgery.

You may need to stop your warfarin several days before surgery. This will prevent bleeding. Always talk to your care team before you start or stop your warfarin.

You may also need to stop warfarin if you have:

- Several teeth pulled.
- A root canal.
- Any exam using a scope (for example, a colonoscopy).
- A biopsy (where a doctor takes a tissue sample, such as skin or breast tissue).

You can usually restart warfarin the day of surgery, unless your care team tells you not to. Call your care team if you have questions.

**Travel, exercise, alcohol and tobacco**

**Travel**

If you will go on a trip for 2 weeks or longer, tell your care team. You may need to have a blood test while you’re away.

Make sure that you have enough warfarin to last during your trip. If you travel by plane, keep your medicine in your carry-on bag.

**Exercise and activity**

Exercise is good, but you should avoid contact sports (football, hockey, soccer and so on).

Avoid activities that carry a high risk of injury. If you’re not sure if a job or activity is high-risk, talk with your care team.

**Alcohol**

Avoid drinking alcohol. If you choose to drink, have no more than 1 to 2 drinks in 24 hours. Binge drinking will put you at greater risk for falling, which increases your risk of bleeding. Be sure to let your care team know about your alcohol intake.

**Tobacco**

Smoking or chewing tobacco can affect your INR number. If you start or stop smoking or chewing, let your care team know.

Tobacco is bad for your health. If you use tobacco, ask your care team for help in quitting.
Tips to prevent injury and bleeding

- Use a soft toothbrush and waxed dental floss. Avoid toothpicks.
- Use an electric razor. Be very careful when trimming your toenails.
- Take care with knives, scissors and other sharp objects.
- Wear sturdy shoes and gloves when working outdoors. Wear shoes or non-skid slippers in the house.

Medical ID

Please wear a medical ID bracelet or necklace. You should also carry an ID card that states:

- The name of the drugs you’re taking and why you’re taking them.
- Your name, phone number and address.
- Your clinic’s name, phone number and address.

It’s vital that everyone involved in your health care (doctors, dentists, nurses and pharmacists) knows that you take warfarin. If you’re injured, your ID card will tell medical workers how to safely treat you.

Medication therapy management

If you need help with your medicines, you may meet with a specially trained pharmacist. He or she will help you manage your medicines safely. Meetings are 30 to 60 minutes long.

For details or to make an appointment, call 612-672-7005.

Refills

To get a refill of your medicine, call:

Metro area: 612-375-0025
Toll free: 1-866-823-8686

Or visit www.fairviewrx.org.