Pine Street Family Practice



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Coumadin (warfarin) Anticoagulation Therapy:

What you need to know and do

What are anticoagulants and why do I need them?

Anticoagulants are medications that help prevent blood clots. They're often prescribed for people with certain heart, lung, and blood vessel diseases to help prevent heart attacks and strokes. Other than aspirin, the most commonly used anticoagulant is Coumadin (warfarin). Though Coumadin is a valuable medication that has helped millions of people over the years, it's tricky to manage. That's because many factors can dramatically affect how it works — including small changes in dose or dose timing, what you eat or drink, other medications you take, and illness or stress.

You and your doctor must work closely together to manage this important medication. This handout provides information to help you do that.

How does Coumadin work?

Although Coumadin and other anticoagulants are sometimes called "blood thinners," they don't actually thin your blood. They won't break up existing clots, either. But they do prevent clots from forming, and they can keep existing clots from getting bigger.

Anticoagulants work by blocking the action of vitamin K. Your body needs vitamin K to create blood clotting factors. Blocking some of these factors can prevent blood clots, but if too many clotting factors are blocked, you risk excessive bleeding. Therefore, it's important — and tricky — to find just the right balance.

How and when do I take Coumadin?

Different people need to take their doses in different ways, and their regimen can change from time to time. That's because the amount of Coumadin you take can dramatically affect how it works. The next page provides general guidelines, but you should always follow your doctor's specific instructions.

Name brand or generic?

There are several generic versions of warfarin. Though they may cost less, they often have different potency (strength) than name brand Coumadin.

This can affect the balance between blood clotting factors. Because of the proven consistency of Coumadin, many doctors prefer that you use it instead of a generic. Ask your doctor.

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Coumadin dosing guidelines

Following are general dosing guidelines for Coumadin.

Always follow your doctor's specific instructions if they differ from those below.

- What dose to take: Coumadin is often prescribed
 in a weekly dose. Your doctor will tell you exactly how
 much to take each day to add up to the right weekly dose.
 Some days you may need to take half a tablet. See the
 bottom of this page for a sample daily dose tracking chart.
- When to take your dose: You should take your
 Coumadin at the same time every day. Many doctors
 prefer you take it in the evening. That way, if your
 regular blood test shows you need a change in dose, you
 can be told about that change before your evening dose.
- What to do if you forget a dose: If you forget to take your Coumadin, take it as soon as you remember. If it's time for your next dose, do one of the following based on your doctor's specific instructions:
 - ☐ Take both doses OR
 - ☐ Skip the dose you missed and take the current dose only (do not double up)

If your doctor has not specified one of the above, call for instructions. **Never make up more than one missed dose**. Make a note of the missed dose in your dose tracker — along with the action you took. Tell your doctor at your next visit.

What follow-up tests will I need?

When you're on an anticoagulant, you'll need to have regular blood tests to check your PT/INR. A PT/INR test measures how long it takes your blood to form clots — and helps make sure you're taking the right amount of Coumadin.

- What does PT/INR mean? PT stands for prothrombin time, sometimes abbreviated as protime. This is the time it takes your blood to clot. INR stands for "International Normalized Ratio," which is a standard calculation based on your PT.
- How often do I have to be tested? When you first start anticoagulation therapy, or when you change doses, you may have to have a PT/INR test every few days or every week or two. Once your PT/INR values become stable, you'll test less often. But you'll always need to be tested at least once a month.
- What should my PT/INR value be? The target range for PT/INR is usually 2.0 to 3.0, or 2.5 to 3.5, depending on your diagnosis. If your PT/INR test is out of your target, your doctor or clinic staff will contact you. They may ask questions about changes in your diet, your health, and other medications. They may also suggest a change in weekly and daily dosing.

Dosing Tips

- Use a PILLBOX: Using a pillbox is a great way to keep track of your daily dose, and to remind you to take your medicine every day. At the beginning of each week, fill the pillbox with the right dose for each day of week.
- Use a daily dosing chart such as that shown below to track your dosing instructions and any changes based on your blood tests. Make a note of any missed doses in your dose tracker along with the action you took. Tell your doctor at your next visit.

Sample Daily Dosing Chart

Go to intermountainhealthcare.org/anticoagulation for more dosing charts and trackers.

Date	Tablet strength and color	Weekly dose	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
6/17 to 6/24	2 mg lavender	10 mg	1 tablet	1/2 tablet	1 tablet	1/2 tablet	1 tablet	1/2 tablet	1/2 tablet

What else should I know about taking Coumadin?

Many factors affect the action of your anticoagulant. It's important to be aware of these factors and follow your doctor's advice carefully.



Food and drink

Vitamin K

Be **consistent** in the amount of vitamin K-rich foods you eat. This makes it easier for your doctor to match your Coumadin dose to your intake of vitamin K. Here are a few foods that are rich in vitamin K:

- most green, leafy vegetables — including dark green lettuce, spinach, kale, parsley, and collard greens
- · brussels sprouts
- cabbage
- avocado
- asparagus
- · broccoli and cauliflower
- cucumbers (unpeeled)
- · green peas
- soybean and canola oils
- soymilk
- · liver, liverwurst, and beef heart

Alcohol

Avoid or limit alcohol. Drinking alcohol can affect your PT/INR level, making it difficult to manage your Coumadin dose. If you drink and don't want to quit, be consistently moderate in your alcohol intake.

Cranberry and grapefruit juice

Limit cranberry juice to ½ cup per day. Drinking more than ½ cup of cranberry juice can affect how Coumadin works in your body. Your doctor may also tell you to avoid drinking grapefruit juice at the same time you take your Coumadin (doctor advice varies).

Medication interactions

Talking to your doctors

Since so many medications can affect how your anticoagulant works, you should tell all your healthcare providers ALL medications you're taking. Also, remind them that you're taking Coumadin. A doctor needs to know this before prescribing any new medications.

Medicines to watch for

Call your doctor or anticoagulant clinic if you start, stop, or change your dose of any of these medicines:

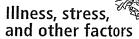
- antibiotics (if you're prescribed a course of 3 days or more)
- antidepressants
- amiodarone (Pacerone or Cordarone)
- · cholesterol medication
- interferon
- fluconazole (Diflucan)
- steroids
- multivitamins

Pain relief

Avoid aspirin, ibuprofen (Advil, Motrin), or naproxen (Aleve) unless prescribed by your doctor. Taking acetaminophen (Tylenol) is okay — but limit your daily intake to 2,000 mg or less (6 regular or 4 extrastrength tablets or less).

Herbal supplements

Don't take herbal supplements without checking with your doctor first.



Illness and stress

Both illness and stress can affect how well Coumadin works. If you've been ill or hospitalized, or had more stress than usual, talk with your doctor. You may need to have more frequent blood tests to help adjust your Coumadin dose during this time.

High-risk activities

Check with your doctor before doing any activity where you risk getting hurt. This includes contact or extreme sports, work that puts you on a ladder or around sharp tools, etc. When you're on Coumadin, an injury could cause serious bleeding.

Pregnancy

Don't take Coumadin if you're pregnant or plan to become pregnant. Coumadin can cause birth defects. Use birth control if you have any chance of pregnancy — and if you find out you're pregnant anyway, stop taking Coumadin right away and call your doctor.

Surgery and dental procedures

Sometimes it's necessary to stop taking Coumadin before surgery. It's usually not necessary, however, to stop taking Coumadin before a dental procedure. Be sure to contact the doctor who manages your Coumadin therapy at least 2 weeks before any procedure is scheduled.

What about follow-up appointments?

Be sure to keep ALL your appointments for blood tests and follow-up appointments. Remember, in most cases, you should have a PT/INR test at least monthly, and a doctor's evaluation at least annually. Together, you and your doctor can make sure you get the most benefit — safely — from your anticoagulant.

Appointment information:	
Follow up with your primary care provider or the anticoagulf you have an appointment, write the information below.	ulation clinic in days for a blood test to check your PT/INR.
Date and time:	Where:

Call your doctor or anticoagulation clinic in these situations:

- If you start, stop, or change the dose of any of the medications listed on page 3.
- If you've been told to stop your Coumadin before a surgical or dental procedure. Try to call at least 2 weeks before the procedure is scheduled. Your doctor may need to give you a medication other than Coumadin before and after the procedure.
- If you've been very ill or hospitalized.
 Your doctor can help make sure your current dose fits your current circumstances.
- If you notice any of these signs of increased bleeding:
 - Bruising that is more than usual, or more than you would expect
 - Abnormal bleeding from the nose or gums
 - Pink, red, or dark brown urine
 - Minor bleeding or bright red blood from the bowel
 - Increased menstrual bleeding

Call 911 or go to the hospital emergency room if you notice any of the signs below:

- A very bad headache and stiff neck that come on suddenly
- · Black, tarry, and smelly loose stools
- Sudden dizziness, faintness, or weakness
- Sudden pain in a joint (like an ankle, knee, wrist, elbow, shoulder, or hip)
- Cloudy vision that comes on suddenly
- Cold or numbness in your arm or leg
- Sudden chest pain with or without shortness of breath
- Trouble talking or trouble moving one side of your body

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How do I keep my vitamin K intake consistent? Keep your intake of foods rich in vitamin K about the same each day. For example, you may plan to eat only ½ cup of these foods per day. If you like these foods and eat them often, you can eat more, but be consistent.

- Do not a make any major changes in your intake of foods rich in vitamin K. For example, if you typically have a spinach salad daily, do not stop eating it entirely.
- Carefully consider dietary supplements. Many dietary supplements can alter the INR/PT such as:
 arnica, bilberry, butchers broom, cat's claw, dong quai, feverfew, forskolin, garlic, ginger, ginkgo,
 horse chestnut, insositol hexaphosphate, licorice, melilot (sweet clover), pau d'arco, red clover, St.
 John's wort, sweet woodruff, turmeric, willow bark, and wheat grass. Much is unknown about
 dietary supplements. The safest policy is for individuals on warfarin (Coumadin) to avoid all dietary
 supplements unless your physician approves. This includes any vitamin/mineral supplements that
 list vitamin K on the label. If they are taken regularly

What foods are rich in vitamin K*?

Food Serving Size Vitamin K (mcg

Kale, cooked 1/2 cup 531 Spinach, cooked 1/2 cup 444 Collards, cooked 1/2 cup 418 Swiss chard, raw 1 cup 299 Swiss chard, cooked 1/2 cup 287 Mustard greens, raw 1 cup 279 Turnip greens, cooked 1/2 cup 265 Parsley, raw 1/4 cup 246 Broccoli, cooked 1 cup 220 Brussels sprouts, cooked 1 cup 219 Mustard greens, cooked 1/2 cup 210 Collards, raw 1 cup 184 Spinach, raw 1 cup 145 Turnip greens, raw 1 cup 138 Endive, raw 1 cup 116 Broccoli, raw 1 cup 89 Cabbage, cooked 1/2 cup 82 Green leaf lettuce 1 cup 71 Prunes, stewed 1 cup 65 Romaine lettuce, raw 1 cup 57 Asparagus 4 spears 48 Avocado 1 cup (cube, slice, puree) 30-48 Tuna, canned in oil 3 ounces 37 Blue/black-berries, raw 1 cup 29 Peas, cooked 1/2 cup 21