TITLE: INPATIENT WARFARIN INR MONITORING POLICY

PURPOSE: To reduce the likelihood of patient harm associated with warfarin therapy

POLICY STATEMENT: In June 2007, the Joint Commission (TJC) approved the National Patient Safety Goal 3E (NPSG 3E) on Anticoagulation (NPSG.03.05.01). This goal aims to reduce the likelihood of patient harm associated with anticoagulation therapy. TJC included elements of performance upon which each institution will be evaluated. The element regarding warfarin monitoring is shown below:

NPSG.03.05.1 Element of Performance #8
Before starting a patient on warfarin, assess the patient’s baseline coagulation status; for all patients receiving warfarin therapy, use a current International Normalized Ratio (INR) to adjust therapy. The baseline status and current INR are documented in the medical record.¹

POLICY ELABORATION:

Warfarin Initiation
1. New orders for warfarin should include a baseline INR documented in the medical record within 48 hours prior to initiation.

Monitoring Responsibility
The pharmacist verifying the warfarin order is responsible for checking the electronic medical record (EMR) to ensure a baseline INR is present. If a baseline INR is not available, the pharmacist will contact the physician, request that a baseline INR be ordered and suspend the warfarin order until the INR result is available.

2. INR monitoring should begin after the 2nd dose, on days 3, 4, 5, and 6. Thereafter, INR should be drawn at least every-other-day until 2 consecutive therapeutic values are obtained. INRs should then be checked no less than twice weekly.

Monitoring Responsibility
The pharmacist assigned to cover anticoagulation monitoring is responsible for ensuring INRs are ordered accordingly. If INRs are not ordered per policy, the pharmacist will contact the physician to request INR orders according to policy.
Warfarin Chronic Use

Patients with stable INRs in therapeutic range, on a stable warfarin dose should have INRs checked upon admission and then at least twice weekly.

Monitoring Responsibility

The pharmacist assigned to cover anticoagulation monitoring is responsible for ensuring INRs are ordered accordingly. If INRs are not ordered per policy, the pharmacist will contact the physician to request INR orders according to policy.

To aid compliance, the Anticoagulation Safety Committee has created a Sunrise Warfarin Order Set with pre-checked boxes for ordering INRs.

*For further information on warfarin indications, dosing, monitoring and therapeutic ranges see the “Warfarin-Anticoagulation Therapy Guideline” posted on the Anticoagulation section of the UHS Clinical Pathways/Guidelines page.

*For outpatient INR monitoring policies see the “Outpatient Anticoagulation Clinic Policies and Procedures” posted on the UHS Clinical Pathways/Guidelines page.

Reference:

Prepared by: Crystal Franco-Martinez, PharmD, 1/2009
Approved by: Anticoagulation Safety Committee 2/2009
P&T Committee 3/2009