TITLE: INPATIENT WARFARIN UNIT DOSE DISPENSING POLICY

PURPOSE: To reduce the chance of error when prescribing and dispensing warfarin

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

NPSG.03.05.1 Element of Performance #1
Use only oral unit-dose products, pre-filled syringes, or pre-mixed infusion bags when these types of products are available.\(^1\)

POLICY ELABORATION: 1. Warfarin doses requiring partial tablets should be avoided if possible. If such a dose is ordered, the prescribing physician will be contacted by pharmacy and asked if the dose can be changed to an available tablet strength. Tablet strengths on UHS formulary include: 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, and 10 mg.

2. Cutting of warfarin tablets should be avoided if possible. (ex. do not dispense a 10 mg table for a 5 mg dose)

3. Tablets may be combined for doses that do not come in single tablet strengths (ex. 8 mg).

4. If the Pyxis System in a patient care unit does not have the available dose, it will be dispensed by pharmacy.

Reference:

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