

Patient Safety ALERT – Getting Medicines Right : WARFARIN

Warfarin is an anticoagulant drug which has a narrow therapeutic index.

Careful monitoring, using the **International Normalised Ratio (INR)** is required to ensure that the patient's blood is not too thin (high INR) or too sticky (low INR).

The higher the INR, the greater the risk of bleeding or haemorrhage.

Each patient will have a **target INR**, according to the **indication** for warfarin treatment. The INR needs to be monitored and maintained as close to target as possible to ensure safe and effective warfarin treatment.

Recent investigations into raised INRs (INRs over 6) have identified that increased INR monitoring is particularly important:

- On admission or transfer from one care setting (hospital or community) into our care
- When medication is started, stopped or when doses are changed
- Antibiotics are started, stopped (or doses changed)
- When starting warfarin; ensure that local Formulary advice and Trust clinical guideline on 'loading' doses are followed

ACTION: Ensure all staff are aware of the above.

Wards / units consider whether near patient / point of care testing with 'CoaguChek' machine may be helpful to increase timeliness of testing (where venous sampling is not always available, e.g. at weekends)