

NHS Lanarkshire Care Homes Protocol Group

Warfarin Guidance and Administration Record for Care Homes

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Governance or Assurance Committee	South Lanarkshire HSCP Health Governance Group
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This guidance has been developed to support care homes across Lanarkshire in managing and administering warfarin prescriptions for residents.

What is warfarin and why is it used?

Warfarin is a medicine in the group of medicines known as anticoagulants. Anticoagulants reduce the ability of the blood to clot. This is necessary if the blood clots too much, as blood clots can block blood vessels and lead to conditions such as a stroke or a heart attack.

Why is warfarin a high risk medicine?

Many medicines, foods and alcohol can increase or decrease the effect that warfarin has on blood clotting. Achieving a dosage of warfarin that's both safe for the patient and sufficient to prevent thrombotic events needs regular blood monitoring. If a patient's blood clotting score (INR) is too high on a blood clotting scale, then there's a real risk of bleeding; too low and there's a risk of blood clots.

Best practice points for safe administration of warfarin:

- Care home should have a written protocol for administration for warfarin.
- Care staff who administer anticoagulants or support people to take their own must be trained to undertake their duties safely
- Care staff administering warfarin should be familiar with different colours of various strengths.
- Warfarin should be administered from original packs **NOT MDS**.
- Service users have copy of "yellow book" which they should take to all warfarin clinic appointments.
- Staff administering warfarin should cross check the last INR result, when the next blood test is due and the current dose **EVERY** time warfarin is administered.
- Record administration on the warfarin administration record. The MAR sheet should be annotated 'refer to warfarin chart'.
- Warfarin should be administered at the same time each day.
- Record missed doses on the warfarin chart. **Don't give an extra dose.**
- Changes to medication or significant dietary changes may increase the frequency of blood testing required. Seek advice from the pharmacist, GP or clinic.
- Report the following side effects immediately to the GP or out of hours service:
 - Nose bleeds >10mins
 - Blood in vomit/sputum/urine/faeces
 - Black coloured faeces
 - Severe or spontaneous bruising
 - Unusual headaches

Further information can be found in the [NPSA Anticoagulant patient safety alert - Advice for social care providers](#).

Managing dose changes for warfarin

- Warfarin doses should be confirmed by prescribers in writing by e-mail to the care home nhs.net account (or, in due course, nhs.scot account) or by fax where possible.
- If written confirmation is not available and a verbal instruction is given, dose changes should be recorded using the warfarin verbal instruction form
- Verbal instructions to change a prescription can only be made in the following circumstances
 - a) To discontinue a medication
 - b) To increase or decrease the dosage of a current prescription
- verbal instructions cannot be taken for starting a patient on their first prescription
- **TWO** staff members should independently receive and read back the instruction to the prescriber, record the dose and witness with a signature.

Recording administration of warfarin

As warfarin is a high-risk medicine, accurate recording of doses and administration is of paramount importance.

The NHS Lanarkshire warfarin administration record (attached) can be used to facilitate accurate recording.

Administration should only be recorded and signed for on one administration record.

If using the NHS Lanarkshire warfarin administration record, or any other additional sheet to record administration, each warfarin entry on the person's MAR chart should be annotated "refer to warfarin chart".

Warfarin Guidance and Administration Record for Care Homes
Warfarin verbal/fax instruction form



RESIDENT'S NAME/ D.O.B.

Name of Care Home/Unit

Warfarin Clinic/GP contact details:

Warfarin administration to be recorded on this form. MAR chart should be annotated 'see warfarin chart'.

Cycle day	Date	INR due	Dose prescribed (mg) *	Dose frequency (e.g. daily, alternate days)	Number of tablets administered				Volume of warfarin 1mg/ml liquid administered	Administered by	Checked by
					0.5mg tablets (white)	1mg tablets (brown)	3mg tablets (blue)	5mg tablets (pink)			
1											
2											
3											
4											
5											
6											
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*Dose should be transcribed from the resident's Yellow Book or if a verbal or faxed instruction is given, this should be recorded below and must be witnessed by TWO staff members.

