

Warfarin

This leaflet is about warfarin. It explains:

- What warfarin is
- How to use warfarin safely
- How we check your blood clotting levels while you are taking warfarin.

What is warfarin?

Warfarin is an anticoagulant (blood thinner). It prevents blood clots forming in your blood vessels by slowing down the clotting process.

Does warfarin cause side effects?

You may bruise or bleed more easily. We try to control your blood clotting levels within the target range so the risk of serious bleeding or bruising is low.

If you get unexpected bruising, please tell us (the anticoagulant service) or your GP as soon as possible. Seek urgent medical advice (telephone your GP, 111 or 999) if you notice any of the following signs or symptoms of internal bleeding:

- Nose bleeds (lasting longer than 10 minutes).
- Blood in stool (poo) or black poo.
- Blood in vomit (sick) or sputum (spit).
- Severe new headache or symptoms of stroke (see table below).

Symptoms of stroke:

| | |
|---------------|---|
| Face | Your face has dropped on one side, or you cannot smile or your mouth or eye has drooped. |
| Arms | You cannot lift both arms and keep them up |
| Speech | Your speech is slurred or garbled, or you may not be able to talk at all, despite being awake. |
| Time | It is time to dial 999 immediately if you notice any of these signs or symptoms of stroke. |

Minor bruising or bleeding

If you have minor bruising or bleeding, and your next test is within three days, please tell us by:

- Writing on the test slip or
- Telephoning us before you come for the test.

Some people experience nausea (feel sick) and/or get diarrhoea (loose poo) in the first few days of starting warfarin. If this does not get better after a few days, please contact your GP as you may need to change medication.

How long will I need to take the warfarin for?

This depends on why the doctor has prescribed it. If you are unsure, please ask. Some people need treatment for a few months, others will need it long-term.

What dose of warfarin should I take?

This varies from patient to patient and the dose you start on may be higher or lower than the dose you need later. Your dose will depend on the results of regular tests. We measure blood clotting by a test called an International Normalised Ratio (INR). The higher the INR, the longer it takes your blood to clot. We will tell you your target INR range. When you start on warfarin we give you a dosage slip which tells you the dose to take each day. The dose is in milligrams (mg) per day. There are three strengths of warfarin tablet:

- 1mg tablets (brown)
- 3mg tablets (blue)
- 5mg tablets (pink)

Your dose will be a combination of these.

For example: 7mg = 1 pink + 2 brown tablets.

Take your warfarin at the same time every day, ideally between 8.00pm and 10.00pm.

You will need to get repeat prescriptions for warfarin from your GP. Please re-order when you still have at least a week of tablets left so you do not run out. Please check that you have all three strengths of warfarin, and that they are in date.

Please tell us about any changes in your other medicines, even if they are temporary, such as antibiotics and steroids. Do not take aspirin or medicines containing aspirin or non-steroidal painkillers (for example ibuprofen, Nurofen) unless prescribed by your doctor.

Please also tell us if you become ill for more than 48 hours for example, have diarrhoea (loose poo) and vomiting. You may need a blood test sooner than planned. As a general rule, we like you to have an INR test about four days after any health problem or medication change. A repeat test is particularly important if you have recently been in hospital.

Missed a dose or taken the wrong dose?

If you forget to take your warfarin, you can take it up to midnight that night. If it is after midnight, then miss that dose and continue to take the usual dose the following evening. If you miss a dose, make a note on your blood test form and then continue the next day with your normal dose. Do not take an extra dose to “catch up”.

If you took the wrong dose and this was much more or less than the advised dose, contact the Anticoagulation Clinic, your GP or NHS 111 as soon as possible.

Where can I have my INR blood test?

- The Royal Berkshire Hospital Pathology Department, South Block at any time between 7.30am and 4.00pm on weekdays or the Concourse (subject to staffing) level 2 Centre Block from 9.30am to midday.
- West Berkshire Community Hospital, Thatcham, Pathology Department by appointment only by phoning 01635 273343.
- At your GP's surgery – you will need to book an appointment with the practice nurse.
- Via a district nurse by appointment through your GP's surgery.
- Bracknell Healthspace Pathology Department between 8.00am and 2.00pm on weekdays.

All these places will send your blood to the laboratory for testing. It is essential that you always take a warfarin blood test form with you when you have your blood taken. This enables your results to be fast-tracked. Please ensure you complete the questionnaire on the form before each blood test.

What about pregnancy?

Warfarin will damage the unborn baby. Do not plan to become pregnant without consulting your doctor. If you think you may be pregnant while taking warfarin, please contact your doctor at once.

What about holidays?

Tell us if you are going to be away. We will try to arrange your next test to avoid your holiday dates. If we feel that for your safety you need a blood test during your holiday, we will give you the paperwork for this.

When you go away:

- Take enough tablets with you for the whole trip.
- Keep a copy of your anticoagulation prescription with you, as well as your most recent dosage letter.
- Take your Anticoagulation Alert Card (which the clinic gave you at the start of treatment) in case of emergencies.
- In an emergency, please contact a local doctor.

How can I contact the anticoagulant clinic staff?

We are available Monday to Friday (except bank holidays) from 9.30am to 5.00pm.

Tel: 0118 322 7691

Email: rbft.anticoagulantclinic@nhs.net

Our telephone lines can be very busy at times. We operate a caller waiting system and we do answer all callers who wait. Outside of opening times please contact your GP or NHS 111. We check clinic emails throughout the day, but we will prioritise as necessary. If your query is very urgent, please contact us by telephone. Please tell us about non-urgent information using the bottom part of your dosage slip (see below). For example your holiday dates, so we can try to avoid blood tests while you are away.

Sample of blood test form

| ANTICOAGULANT MONITORING SERVICE REQUEST FORM | |
|--|---|
| Hosp No: *R5154561* | Since your last INR test, have you (please circle)... |
| (R5154561) | Been in hospital/any future operations YES/NO |
| Name: BPSUA PATIENT ZZZTEST | Had any unexpected bruising or bleeding YES/NO |
| DOB: 01/01/1999 | Missed any anticoagulant tablets (include dates) YES/NO |
| Contact No: 232323 | Changed or started other drugs (include dates) YES/NO |
| NHS No: (954 122 1459) | Changed your GP Practice YES/NO |
| GP: Dr Brewster - (ABRHE) | Booked a holiday not already known to us (dates) YES/NO |
| BALMORE PARK SURGERY | If YES to any of the above, then please detail below: |
| - (HEM) - (K81014) | <div style="border: 1px solid black; height: 40px; width: 100%;"></div> |
| Reason for AC: AF with TIA/CVA | |
| Therapeutic Range: AFNR98 2.0-3.0 | |
| Next INR due on: 09/09/2019 | |
| FOR PHLEBOTOMIST USE (PLEASE SIGN)..... | |
| SPECIMEN date..... Time..... | |
| | LAB USE ONLY insert barcode |
| | <div style="border: 1px solid black; height: 30px; width: 100%;"></div> |

Warfarin summary checklist

You should:

- Report signs of unexplained bleeding and bruising.
- Have blood tests ideally in the morning. Send the bottom part of the blue slip with your blood. **Avoid** having your blood tests on a Friday unless specifically requested by us.
- Take your warfarin at the same time each day, preferably between 8.00pm and 10.00pm.
- Take the correct dose.
- Tell the clinic about any changes to your other medications.
- Eat a normal balanced diet.
- Carry your Anticoagulant Alert Card with you.
- Make sure the clinic has an up to date address and telephone number for you.

You should not:

- Take aspirin or medicines containing aspirin or non-steroidal painkillers (e.g. ibuprofen, Nurofen) unless prescribed by your doctor.
- Do not go on a crash diet or drink a lot of alcohol.
- Do not miss a dose of warfarin unless we tell you to do so.
- Do not take extra doses or change your dose of warfarin **without first** discussing with us.
- Do not run out of warfarin tablets. Ask your GP surgery for a repeat prescription in good time.

Be aware:

- ⚠ Tell your dentist or other healthcare professionals treating you that you are on warfarin.
- ⚠ If you think you may be pregnant while taking warfarin, contact your doctor at once.
- ⚠ Tell the clinic of any changes of address, telephone number and/or GP practice.

Important points to remember

- You should see your GP once a year for a review to check that warfarin is still appropriate for you.
- We send your results by post – please allow **three working days** for your slip to arrive.
- Please try and **avoid** having your blood tests on a Friday as we may not see your result until the following Monday.

More information is available on the Trust website www.royalberkshire.nhs.uk

This document can be made available in other languages and formats upon request.

Anticoagulant Clinic, Department of Haematology, October 2019
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