

Anticoagulation Program

Welcome to our Anticoagulation Program! Our clinic is staffed by pharmacists and nurses with specific knowledge in warfarin (Coumadin) therapy. All our care occurs under the supervision of doctors.

Clinic visits are by appointment only and last about 15 minutes. Using a finger stick, we check your INR (International Normalized Ratio), which tells us how your warfarin is working. Then, we make a plan with you to manage your dose so that your INR stays within your goal.

Your INR will be tested weekly until your level is stable and within your goal range. Once your level is within goal range, we will gradually increase the time between appointments to every two weeks and then once a month. Your level must be checked at least monthly. How often you are tested also depends on other factors, such as your clinical condition and your doctor's orders.

If a change to your warfarin dose is made, you must have your level checked sooner until it is stable and within your goal range. Changes in dosing may affect your refills, so we will provide these to you as needed. Note that each tablet strength is a different color (see below). For each refill, please check that you have the correct pill color for your current dose. If anything changes, please alert the clinic.

If you cannot keep an appointment, please call us to reschedule. Not keeping appointments or following instructions may result in serious health risks for you and/or discharge from our clinic. Because our clinic only manages the anticoagulation part of your care, you still must see your referring doctor at least once a year, as directed, for your medical needs.

We look forward to working with you. Please call us if you have questions or concerns about your warfarin therapy at 864-522-3340. Appointment hours may differ by clinic, but we are available by phone Monday through Friday from 8 a.m.-4 p.m. Any calls made outside this time will be returned the next business day. If you have an emergency, call 911 or go to the nearest Emergency Department.

Coumadin Clinic

Greenville office 3 Butternut Dr., Greenville, SC 29605

Greer office 340 Medical Pkwy., Greer, SC 29650

Internal Medicine office 876 W. Faris Rd., Greenville, SC 29605

Patewood office 200 Patewood Dr., Ste. C300, Greenville, SC 29615

Simpsonville office

729 SE Main St., Simpsonville, SC 29681

1 mg 2 mg 2.5 mg 3 mg 4 mg 5 mg 6 mg 7.5 mg 10 mg 1 mg 2 mg 2.5 mg 3 mg 4 mg 5 mg 6 mg 7.5 mg 10 mg

Know your color, know your dose!

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Why patients take warfarin (Coumadin)

Doctors order patients to take warfarin for four major reasons. These reasons appear below.

Atrial fibrillation (AFib)

AFib causes an abnormal, irregular heartbeat. Many people with AFib have no symptoms but have an increased risk of a stroke. Patients with AFib take blood thinners like warfarin to prevent blood clots that can lead to a stroke.

Mechanical heart valve

Patients with mechanical heart valves are at an increased risk for blood clots. Clots can lodge in the valve, causing a malfunction. Clots also can travel through the blood and cause a stroke. Blood thinners like warfarin help prevent blood clots that can lead to a stroke.

Pulmonary embolism (PE)

A PE occurs when a blood clot gets stuck in the lung. Symptoms include shortness of breath, chest pain, dizziness or fainting. Blood thinners like warfarin help prevent blood clots that can lead to another PE. A PE can be fatal.

Deep vein thrombosis (DVT)

A DVT occurs when a blood clot lodges in a vein. The result can be reduced or blocked blood flow, which causes swelling and pain. DVTs often happen in the "deep veins" of the legs, thighs or pelvis. Blood thinners like warfarin help prevent future blood clots from forming.

Signs and symptoms of clotting and bleeding

Anticoagulants (blood thinners) are commonly used to treat or prevent blood clots. Although these medications lower the risk of clotting, they do not completely take away the risk. For example, if you stop taking your medication or miss a dose, your risk of clotting will increase.

Please watch for the following signs so that you can get care quickly if clotting occurs.

Signs and symptoms of a blood clot

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A clot can cause lasting damage or death if not treated. Clots can form in veins, arteries or the lungs.

Go to the closest Emergency Department at once if you have:

- Shortness of breath
- Sharp chest pain
- Redness, swelling, heat or pain in any limb
- Discoloration (blue/purple), coldness or pain in any limb

Signs and symptoms of a stroke

A stroke occurs when a clot blocks the flow of blood to the brain. Seek help right away to reduce brain damage. Strokes can be fatal.

Call 911 at once if you have:

- Ongoing dizziness, sudden vision changes or a sudden, severe headache
- Sudden numbness or weakness on one side of the body
- Slurred speech or difficulty speaking
- Facial drooping

Act F-A-S-T to recognize the warning signs of stroke:

- FACE: Ask the person to smile. Does one side of the face droop?
- ARMS: Ask the person to raise both arms. Does one arm drift downward?
- SPEECH: Ask the person to repeat a simple phrase. Is the speech slurred or strange?
- TIME: If you see any of these signs, call 911 right away.

Because blood thinners increase the time it takes to form a clot, it may put you at risk for severe bleeding. For instance, if you take extra doses by mistake, your risk of bleeding will rise. Please watch for these signs so that you can get care quickly if bleeding occurs.

Signs and symptoms of bleeding

Call your doctor at once if you have:

- Bright red blood in your stool
- Blood in your urine (red or brown colored)
- Uncontrolled bleeding from your nose or gums
- Cuts that will not stop bleeding
- Heavy menstrual bleeding (changing a sanitary napkin or tampon within two hours)
- Bad bruising (bruises that seem to pool under the skin or grow bigger in size)

Go to the closest Emergency Department at once if you have:

- Dark, tarry stools
- Blood while coughing or vomiting (red or resembling coffee grounds)
- A hard fall or hit to the head
- Any type of accident, especially one with a vehicle (car, motorcycle, bicycle, boat)

Over-the-counter medicines and warfarin (Coumadin)

Safe medications

Not all over-the-counter cough and cold medicines are safe to take with warfarin. If you have a cold, try one of these SAFE medicines (brand names are in parentheses):

Cough (wet/productive)

Guaifenesin (Robitussin, Mucinex)

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Cough (dry/non-productive)

Dextromethorphan (Mucinex DM, Robitussin DM, Coricidin HBP)

Stuffy nose

Pseudoephedrine (Sudafed*) Phenylephrine (Sudafed PE*) Oxymetazoline (Afrin nasal spray) Saline nasal spray

Runny nose

Diphenhydramine (Benadryl) Chlorpheniramine (Chlor-Trimeton) Loratadine (Claritin) Brompheniramine (Dimetapp)

Fever

Acetaminophen (Tylenol, Theraflu, Nyquil)

Sore throat

Phenol (Chloraseptic spray) Cepacol lozenges

Headaches/Pain

While on warfarin, you should take only acetaminophen (Tylenol) for headaches/pain, with the following limitations:

- Tylenol Regular Strength (325 mg/tablet): Maximum of six tablets a day
- Tylenol Extra Strength (500 mg/tablet): Maximum of four tablets a day
- Tylenol Arthritis Pain (650 mg/tablet): Maximum of three tablets a day

* May not be safe for those with atrial fibrillation or high blood pressure.

AVOID these medicines

The following medications are NOT SAFE to take with warfarin:

- Menthol cough drops: These drops may increase the risk of forming a clot.
- Airborne: This drug contains many vitamins that can increase your risk of bleeding and herbal supplements that can interact with warfarin.
- Pepto-Bismol, Goody's Powder, Alka-Seltzer and Excedrin: Some formulas contain aspirin or aspirin-type ingredients.

All NSAIDs (aspirin-type medications) can increase your risk of bleeding while taking warfarin. They also can hurt your heart and kidneys. However, aspirin 81-mg tablets may be OK if approved by your doctors.

Below is a list of NSAIDs ranked from least to greatest risk of causing bleeding issues. If you have to take NSAIDs, you should choose one with less risk, take the lowest dose possible and for the shortest time.

Least risk	1. Celebrex
	2. Ibuprofen (Advil, Motrin)
	3. Diclofenac (Volteran)
	4. Meloxicam (Mobic)
	5. Indomethacin (Indocin)
	6. Ketoprofen
	7 Naproxen
	8. Piroxicam

Greater risk 9. Ketorlac

Please discuss vitamins and herbal supplements with the Coumadin Clinic before starting to take them, as they may interact with warfarin.

At the Coumadin Clinic, we strive to provide you with excellent care and high-quality service. If you have any questions about the information on this sheet, please contact us.

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Lifestyle factors that affect warfarin

Warfarin can interact with many foods and drinks. As a result, you should keep your diet consistent. REMEMBER: Keep serving sizes the same and eat the same number of servings each week.

Foods and drinks that can decrease your clotting time

Vitamin K in the diet affects the ability of warfarin to do its job. The higher the vitamin K content of a food, the more it can lower your INR, which increases your risk of forming a clot. That is why it is important to keep your diet the same.

Below is a list of foods high in vitamin K. If you decide to eat these foods, please limit your serving sizes as listed below. The Coumadin Clinic will adjust your warfarin dose to match the diet you choose, but remember to keep your serving size and number of servings consistent each week.

Vegetables

- Beet greens (1/3 cup cooked, 1/2 cup raw)
- Broccoli, Brussels sprouts (1 cup)
- Cabbage (1 cup)
- Coleslaw (1/2 cup)
- Collard greens (1/3 cup cooked, 1/2 cup raw)
- Endive (1/3 cup cooked, 1/2 cup raw)
- Green leaf/Romaine lettuce (2 cups)
- Kale (1/3 cup cooked, 1/2 cup raw)
- Mustard greens (1/3 cup cooked, 1/2 cup raw)
- Parsley (10 sprigs)
- Scallions (1/3 cup cooked, 1/2 cup raw)
- Spinach (1/3 cup cooked, 1/2 cup raw)
- Turnip greens (1/3 cup cooked, 1/2 cup raw)

Drinks

- Boost nutritional drink (8 fluid oz.)
- Slimfast Meal Replacement (1 can)

Fats/Oils/Condiments

• Soybean oil (4 tablespoons)

Meats

• Liver (1 slice)

Foods and drinks that can increase your clotting time

Alcohol: Do not drink over one or two standard servings per 24 hours of any of the following:

- Beer or malt beverage (serving = 12 oz.)
- Wine (serving = 4 oz.)
- Liquor or spirits (serving = 1.5 oz.)

Cranberries (fruit, juice or sauce): Avoid cranberry products if you don't consistently consume them. Use no more than 1 teaspoon of cranberry sauce during the holidays.

Pomegranates (fruit or juice): Avoid if you don't consistently consume them.

Ginger (soda or spice): Avoid if you don't consistently consume ginger.

Smoking and warfarin

Smoking decreases INR. If you quit or start smoking, please let us know. Changes in your smoking habits can affect your INR level, so your warfarin dose may need to be adjusted.

At the Coumadin Clinic, we strive to provide you with excellent care and high-quality service. If you have any questions about the information on this sheet, please contact us.

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Warfarin and cranberries

Cranberries to revent UTIs? Not so fast!

Although many people believe that cranberry juice or supplements prevent urinary tract infections (UTIs), this claim has never been supported by evidence-based studies. In fact, studies have consistently shown that taking cranberry supplements or drinking cranberry juice (approximately 2.5 cups a day) does not prevent UTIs.

Interaction with warfarin

Warfarin can interact with many foods and drinks. Warfarin also increases the time it takes for your blood to form a clot. This process is called anticoagulation. Cranberry products increase the anticoagulant effects of warfarin, which may put you at risk for severe bleeding. Cranberries can cause your INR to increase as well, which indicates that you are at a higher risk of bleeding.

Because cranberry supplements are not regulated by the U.S. Food and Drug Administration (FDA), it is not known how much cranberry concentrate is in each product. This means it can be very hard to predict the effect cranberry supplements will have on a person taking warfarin.

Cranberries and your diet

It is important to keep your diet consistent. Keep your serving sizes the same and eat the same number of servings each week.

- Avoid cranberry products if you don't consistently consume them.
- Use no more than 1 teaspoon of cranberry sauce during the holidays.
- Do not take cranberry supplements while on warfarin.

Ways to Prevent UTIs

- Drink plenty of fluids, especially water, to help flush bacteria from your urinary tract.
- Wipe from front to back after urinating or after a bowel movement.
- Empty your bladder soon after intercourse.
- Avoid deodorant sprays or other potentially irritating feminine products in the genital area.
- If you have more than two UTIs a year, talk to your doctor about starting preventive antibiotics and be sure to let the Coumadin Clinic know!

At the Coumadin Clinic, we strive to provide you with excellent care and high-quality service. If you have any questions about the information on this sheet, please call us at **864-522-3340**.

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Possible medication interactions with warfarin (Coumadin)

Many medications can interact with warfarin (Coumadin). It is important to communicate with your doctor, pharmacist and the Pharmacy Anticoagulation Clinic when your medications are changed. You can call the Pharmacy Anticoagulation Clinic at 864-522-3340.

Below is a list of some medications that have the most severe interactions with warfarin (Coumadin). These medications may cause your INR to increase or decrease, and it is important to alert your clinic if/when you are started on these.

If you take any of the medications listed below, discuss possible blood thinner adjustments with your doctor or pharmacist:

Acid reflux/Indigestion

• Cimetidine (Tagamet)

Antibiotics

Antidepressant/Sleep aid

Amitriptyline (Elavil)

Antifungal

- Fluconazole (Diflucan)
- Miconazole (Monistat)

Asthma/COPD

- Antibiotics
- Steroids
 - -Methylprednisolone (Medrol)
 - -Prednisone (Deltasone)

Cardiology

- Amiodarone (Cordarone)
- Dronedarone (Multaq)

Chemotherapy medications Cholesterol

- Fenofibrate (Tricor)
- Omega-3 fatty acids (fish oil, Lovaza)

Diabetes

• Exenatide (Bydureon, Byetta)

Gout

• Allopurinol (Zyloprim)

Hepatitis medications Herbal supplements HIV medications Hormone therapies Others

Azathioprine (Imuran)

Pain/Inflammation

- Steroids
 - -Methylprednisolone (Medrol)
 - -Prednisone (Deltasone)
- Tramadol (Ultram)

Seizure

- Phenytoin (Dilantin)
- Carbamazepine (Tegretol)
- Phenobarbital (Luminal)
- Primidone (Mysoline)

Tuberculosis

• Rifampin (Rifadin)

Thyroid

• Levothyroxine (Synthroid)

NOTE: This list is not complete. Please check with your doctor, pharmacist or the Pharmacy Anticoagulation Clinic before you start new medications.

BEFORE taking these medications, discuss possible risks with your pharmacist:

- NSAIDs (aspirin-type medications)
- Celecoxib (Celebrex)
- Ibuprofen (Advil)
- Meloxicam (Mobic)
- Naproxen (Aleve)



Surgery or medical procedures while on anticoagulants

Tell all your health care providers (nurses, doctors, dentists, etc.) as soon as you start taking anticoagulants (blood thinners). Being on blood thinners could change your treatment plan.

If you need surgery, a procedure or an injection (such as a steroid for pain), contact the Pharmacy Anticoagulation Clinic as soon as possible, even if the event is not yet scheduled.

Our clinicians will work with your doctors to determine the best way to manage your blood thinner around the time of the procedure. Once the plan is decided, the Pharmacy Anticoagulation Clinic will provide you exact instructions.

Surgery or medical procedure timeline

- 1. Surgery or medical procedure is discussed.
- 2. Notify the Pharmacy Anticoagulation Clinic at least seven days ahead of time of your surgery or procedure.
- 3. Clinicians will work with your doctors to determine a treatment plan.
- 4. Clinicians will notify you of the plan and schedule a follow-up appointment.

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When must I call the clinic?

Pharmacy Anticoagulation Clinic

Although direct oral anticoagulants – such as Eliquis, Xarelto, Pradaxa and Savaysa – do not need to be monitored monthly, certain changes to your medications or health may affect your blood thinner. It is important to know when to contact the clinic to decrease your risk of side effects and other risks.

When to call the clinic:

- Starting a medicine listed on the handout "Possible interactions with anticoagulants (blood thinners)"
- Starting a new herbal supplement
- Being admitted to the hospital
- Going to the emergency room
- Having signs of severe bleeding or clotting that caused you to go to the emergency room or call your doctor
- Scheduling an invasive procedure in the next few months (dental, surgical, etc.)
- Missing multiple doses of your blood thinner
- Having questions about how to take your blood thinner
- Needing a new prescription for your blood thinner

Calling the clinic about these changes will help keep you safe from bad effects of this drug. Please call us at **864-522-3340** with any questions or concerns about your blood thinner.