

INR CLINIC

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PRIMARY GOALS

The primary goals of the INR Clinic are:

1. To increase the amount of time INRs are maintained in the therapeutic range.
2. To improve the management of patients taking oral anticoagulants.
3. To improve patient knowledge of their medication.

DESCRIPTION OF ENHANCEMENT

The INR Clinic is comprised of 6 different documents that are to be used by the practice pharmacist and nurse. Both the pharmacist and nurse receive INRs from participating patients and adjust warfarin doses using the algorithm agreed upon by the FHT. Remote access to the patients' EMR files is available at the INR Clinic in order for changes made to be documented directly into patient records. The INR Clinic has also partnered with the local hospital for STAT INR determination in the event of a 'high' INR reading. This partnership allows a second check for all INRs that are higher than 5 as determined by the point of care machine. It is anticipated that following the implementation phase, the INR clinic will be held 4 full days per week.

The enhancement is comprised of 6 documents:

1. Medical Directive: An 8-page document that explicitly states the procedure to be followed; which patients are covered by the directive; who is authorized to implement the procedure, including educational requirements; and appropriate documentation methods. The Medical Directive includes a patient consent form, the two-page Warfarin Dosing Algorithm to be followed and the flowsheet to be followed when implementing the enhancement with each patient. All physicians participating in the INR clinic must sign the Medical Directive. The Medical Directive also allows the practice pharmacist and nurse to call the pharmacies on behalf of the physicians to re-order warfarin or initiate new doses if necessary.
2. Patient letter: A one-page letter sent to FHT patients taking warfarin signed by their physician to inform them of the new INR clinic and ask them to participate in the new program at the FHT.
3. Information page: A two-page document that is provided to patients taking warfarin that outlines the benefits of attending the INR clinic, the role of their physician with their INR care, and where the clinic is located. The information package was sent to the patient with the Patient letter.
4. INR Clinic Procedure: A one-page document outlining the procedure to be followed with each patient attending the INR clinic.
5. Warfarin documentation template: Each visit to the INR clinic is documented in the appropriate EMR file for each patient. Fields for the date of the INR clinic visit, current warfarin dose, INR, any recommendations, course for follow-up and any comments have been included.
6. INR Billing Standard Operating Procedure: A 3-page document outlining the procedure to be followed for OHIP billing related to the INR Clinic. This document is available on request.

POTENTIAL BARRIERS

1. Ensuring that the strips required for each test performed at the Anticoagulation Clinic are billed through the appropriate physician offices.
2. Obtaining remote access to patient EMR charts from physicians who are reluctant to provide this access to allied healthcare professionals.

POTENTIAL FACILITATORS

1. The availability of the Anticoagulation monitoring certificate program run through the University of Waterloo to educate and train healthcare professionals.
2. Minimal space requirements: one room that can fit a small table, 4 chairs (2 task chairs and 2 guest chairs), a computer and a telephone is all that is required for the INR clinic.
3. A computerized clinical support decision program that aids tracking time spent in the therapeutic range, aids in the calculation of dose adjustments, tracks the scheduled workload and any missed appointments.
4. If the FHT includes a large number of physicians resulting in a large population of patients taking warfarin, it may be useful to schedule particular time slots of the INR Clinic for specific physicians. This will ensure that the number of visits to the INR Clinic is spread evenly among the days it is open (versus all potential patients attending the same day).

CONTACT INFORMATION

For further information regarding this enhancement, please contact Cathy Brown
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