

## Your Warfarin Record:

Patient Name: \_\_\_\_\_

Doctor: \_\_\_\_\_

Nurse/Pharmacist: \_\_\_\_\_

Telephone number: \_\_\_\_\_

You are being treated with warfarin for the following condition(s):

- atrial fibrillation
- artificial heart valve
- Clot in the leg or deep venous thrombosis (DVT)
- Clot in the lung or pulmonary embolism (PE)
- Other: \_\_\_\_\_

Desirable Range for INR (Target INR): \_\_\_\_\_

Start date: \_\_\_\_\_

Duration of Therapy: \_\_\_\_\_

*Information for this brochure was adapted from:*

1. *Patient Information: The Thrombosis Interest Group of Canada*
2. *Coumadin® Patient Information.*

This brochure does not provide medical advice. This brochure is developed by the Family Health Team, TWH. It is provided for informational purposes only and meant to supplement a discussion with the pharmacist. Please contact a pharmacist or other health care professionals if you have any questions about this medication.

Please visit the UHN Patient Education website for more health information: [www.uhn.ca/patient/health\\_info](http://www.uhn.ca/patient/health_info).

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Author: Debbie Kwan

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# Information about Warfarin



UHN



Prepared for:

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Family Health Team  
Toronto Western Hospital  
University Health Network  
Telephone: 416-603-5888  
(#1 – North; #2 – South)

Pharmacist or Nurse: \_\_\_\_\_

Patient Education

Improving health through education



University Health Network

Toronto General Hospital Toronto Western Hospital Princess Margaret Hospital

## What is warfarin?

Warfarin is a drug called an anticoagulant. It is used to help prevent blood clots from forming or to prevent blood clots from getting bigger. Warfarin is also known by the trade name Coumadin<sup>®</sup>.

Anticoagulants are sometimes called “blood thinners”, but this does not mean that they “thin” your blood. Warfarin makes your blood less likely to form a clot.

## Why am I taking warfarin?

You are taking warfarin because you have the following condition(s):

- atrial fibrillation
- artificial heart valve
- a clot in the leg or deep venous thrombosis (DVT)
- a clot in the lung or pulmonary embolism (PE)
- Other: \_\_\_\_\_

Usually, blood will clot only after an injury (for example, a cut). But because you have one of the above conditions, you have either developed a clot or have a greater chance of forming blood clots. This can lead to dangerous complications, such as a heart attack or stroke.

**Taking warfarin regularly will help stop or decrease the chances of abnormal blood clots from forming and decrease your chances of a heart attack or stroke.**

- Severe back pain that lasts a long time, without any reason
- Fever and chills for more than 1-2 days (Fever is more than 38 degrees Celsius)
- Vomiting, upset stomach or diarrhea for more than 1-2 days
- Swelling or redness of your feet and lower legs (for more than 1-2 days) especially if it's painful
- Yellow colour of your eyes or skin
- Any changes to your general physical health

## What other things should I know about warfarin?

- Do not take warfarin if you are pregnant or planning to become pregnant.
- Tell your doctor of any falls or injuries
- Always check with your doctor or pharmacist before starting any new medications, vitamins or supplements.

**Please call us if you have any questions.**

Do not eliminate foods containing vitamin K from your diet. Do not make major changes in your diet without first consulting your healthcare provider.

### Is it safe to drink alcohol?

Do not drink more than 1 alcoholic drink per day (1 beer, 1 glass of wine or 1 shot of spirit). Amounts of alcohol greater than this can be dangerous and cause the INR to go too high.



### What side effects should I watch for while taking warfarin?



If you have any of the following tell your doctor right away because your dose of warfarin may need to be changed:

- Bowel movements that have blood or are black
- Urine that has blood
- Any other unusual or constant bleeding such as: nose bleeds, coughing up blood, vomiting blood, lots of bleeding when you brush your teeth, lots of bleeding from small cuts, and heavy menstrual bleeding
- Bruising or tender swelling for no reason
- Severe headaches that last a long time
- Dizziness, trouble breathing, chest pain
- Swelling and pain in your abdomen

### How long will I have to take warfarin?

Many people must take warfarin for the rest of their lives, while others only need it for a short time. You should never stop taking warfarin without first talking with your doctor or other healthcare provider.

### What does warfarin do in the body?

Warfarin decreases the amount of clotting factors in the blood. This makes your blood less likely to form clots that are not normal.

### What blood tests do I need while I am taking this medication?

You need blood tests to make sure you are taking the right amount of warfarin. Blood tests can tell us whether the amount of warfarin you are taking is too little or too much. Taking too little warfarin can increase the chance of a stroke or heart attack. Taking too much warfarin can give you side effects, such as serious bleeding.

The blood test is called the **INR (International Normalized Ratio)**. The INR results are recorded as a number. This number tells us whether you are taking too little or too much warfarin.

In your case, your INR result should be between:

- 2 – 3 (target: \_\_\_\_\_ )
- 2.5 – 3.5 (target: \_\_\_\_\_ )
- Other \_\_\_\_\_



## How often do I need to have the INR blood test?

When you first start taking warfarin, you may have to take a blood test every 3 or 4 days. Once we know the right dose for you, you may have to have a test once a week for a few weeks. Once you are on the same dose for several weeks, you will be scheduled for regular INR testing, probably once every month or more depending on your situation.

## Who will review my INR results and call me about what to do next?



A nurse or pharmacist (working with your doctor), will call you to let you know if there should be any changes to the amount of warfarin you are taking. They will also tell you when you need to go for your next blood test.

Once your warfarin dose has been the same for a period of time, the nurse or pharmacist will check your INR results. They will call you if your dose needs to be changed.

## Can I take other drugs while I am on warfarin?

Many medications can change how warfarin works in your body. This includes:

- prescription medications
- herbals
- vitamins
- supplements
- other over-the-counter medications. Examples include: acetaminophen (Tylenol<sup>®</sup>) or ibuprofen (e.g. Advil<sup>®</sup>).

We ask that you **always** tell your healthcare provider of **changes** to ANY medication including vitamins, supplements, herbals or over-the-counter medications. This lets us see if we need to make a change to your warfarin dose or if you should have lab tests.

Please tell all healthcare providers, including your dentist, that you are taking warfarin so that they can protect you when providing your care.

## What other things will affect the way warfarin works in my body?

Many factors such as sickness (for example, the flu or a cold), diet or alcohol affect the way warfarin works in your body. Always tell your healthcare provider of any changes to your health, activities and habits.

Forgetting to take your warfarin, especially within a day or two of your scheduled INR test, can also affect the results.



## Do I need to avoid foods with vitamin K?

No.

Changes in vitamin K levels can affect your INR. But, you do NOT need to stop eating foods with vitamin K.

There is no “correct” amount of vitamin K that you should eat. Try to eat about the same amount from day to day.

Examples of foods high in vitamin K content include: leafy greens, such as spinach and kale, broccoli, brussel sprouts and asparagus.