A Guide to Taking Warfarin

(Brand names: Coumadin® or Jantoven®)
Your Information

This book belongs to:

____________________________________

Why do you need warfarin?

Your doctor wants you to take warfarin for:

____________________________________

MEDICAL CONDITION

Your INR Target ________________

Your INR Range is ___________ to ___________

The date of your next INR blood test is:

____________________________________

Your next blood test will be done by:

____________________________________

TESTING FACILITY

____________________________________

VISITING NURSE ASSOCIATION

The information provided in this educational booklet is to assist in the management of your warfarin therapy. It is not a replacement or substitute for the medical advice of your doctor or other healthcare provider who is managing or guiding your warfarin therapy.
Your warfarin manager is:

<table>
<thead>
<tr>
<th>Anticoagulation Management Service (AMS) or other provider</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Brigham Internal Medicine Associates Anticoagulation Management Service (BWH-BIMA)</td>
<td>(617) 732-7439</td>
</tr>
<tr>
<td>☐ Brookside Community Health Center Anticoagulation Management Service (BWH-Brookside)</td>
<td>(617) 983-6061</td>
</tr>
<tr>
<td>☐ Brigham and Women’s Hospital Main Anticoagulation Management Service (BWH-Main)</td>
<td>(617) 732-8887</td>
</tr>
<tr>
<td>☐ Dana-Farber Cancer Institute Anticoagulation Management Service (BWH-DFCI)</td>
<td>(617) 525-8213</td>
</tr>
<tr>
<td>☐ Harvard Vanguard Medical Associates Anticoagulation Management Service (HVMA)</td>
<td>(617) 421-2922</td>
</tr>
<tr>
<td>☐ (Other)</td>
<td></td>
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</table>

If you are discharged from the hospital and sent to a rehabilitation center, notify your warfarin manager as soon as you leave the rehabilitation center.

<table>
<thead>
<tr>
<th>INR Test Date</th>
<th>INR</th>
<th>WARFARIN DOSE</th>
<th>Next INR Test Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Sun</td>
<td>Mon</td>
</tr>
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What You Need to Know

☐ Why you are taking warfarin and the importance of taking it exactly as directed

☐ Why your INR blood tests are necessary for monitoring warfarin and the importance of keeping blood test appointments

☐ Where you will have your INR blood tests drawn and the date of your next blood test

☐ Why it is important to maintain a diet consistent in vitamin K

☐ Your contact person for all medication changes or adverse reactions
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(See front inside cover and page 1)

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Before you take warfarin, tell your doctor or warfarin manager if you:

- Are pregnant
- Plan to become pregnant
- Are breastfeeding
- Fall often
- Drink alcohol
  *(including the number of drinks a day)*

or if you have:

- Bleeding problems
  *(past or present)*
- Stomach or intestinal problems
- Liver problems
- Kidney problems
- High blood pressure
- Cancer
Warfarin, Coumadin®, and Jantoven®

Warfarin, Coumadin®, and Jantoven® are the same medication.

Warfarin (warf-ah-rin) is the generic name of the drug. Coumadin® (Koo-muh-din) and Jantoven® (Jan-toe-ven) are brand names. Never change from one to the other unless instructed by your doctor or warfarin manager.

Warfarin is a medication that is sometimes called an “anticoagulant” or “blood thinner,” but it does not thin the blood. It causes the blood to take longer to form a clot. There are many reasons why patients take warfarin. Warfarin can prevent a blood clot from forming or keep an existing blood clot from getting bigger.

Patients taking warfarin need careful monitoring. A warfarin manager can help with this. A warfarin manager may be a doctor, nurse, pharmacist, physician assistant, or a warfarin clinic.
Why do I need blood tests when I am on warfarin?
There are many things that affect how warfarin works. Therefore, the effects of warfarin must be carefully monitored with blood testing. These blood tests help your warfarin manager know how much warfarin you need to take.

What is the blood test I need while taking warfarin?
The blood test you need to have is called Prothrombin Time or protime (PT). This blood test is used to measure the time it takes for blood to clot. The PT results are reported as an International Normalized Ratio (INR). The INR is a universal way to report the results of your blood test regardless of the laboratory that does it.

There is a chance of bleeding or developing a blood clot while taking warfarin, so it is important to have your blood tested when your warfarin manager tells you.

What is my INR target range?
Your INR target range depends on why you need warfarin. Your doctor or warfarin manager will tell you your INR target range. Your INR information is on the inside front cover of this book.

How often will I need to test?
You may have an INR test 2 or 3 times per week when you first start warfarin. As your INR and warfarin dose become more stable, you may be able to test your INR less often. More frequent testing may be needed if you become ill or have any changes in your other medications.
Blood Tests

Communication Plan

- Your warfarin manager will contact you after each INR blood test. Based on the results of your blood test, your warfarin manager will tell you how much warfarin to take.

- Make sure your warfarin manager has all the telephone numbers where you can be easily reached.

If any of your contact information changes, it is important to tell your warfarin manager.

- If your warfarin manager does not contact you after your blood test, call your warfarin manager.

- If you miss or cannot make a blood test, contact your warfarin manager as soon as possible to reschedule.

- If you have your INR test at a lab other than the one you usually go to, call your warfarin manager on the day you go for your blood test. Your warfarin manager will then know where to look for your results.

- If possible, schedule your blood test early in the day. This may help your warfarin manager get the results the same day.
How much warfarin do I need to take?
Your warfarin manager will tell you how much warfarin to take. Each patient will have their own dosing schedule. The INR blood test results help your warfarin manager decide what dose of warfarin is right for you. After each blood test, your daily dose of warfarin may change to keep your INR in your target range. It is normal for your dose to change over time.

Taking too little warfarin can cause a low INR and increase your chance of developing a blood clot. Taking too much warfarin can cause a high INR and increase your chance of bleeding. This is why the INR tests are so important for your safety.
Taking Warfarin

When do I take my warfarin?
Take your warfarin exactly the way your doctor or warfarin manager tells you.

Take your warfarin at the same time every day. Most people take their warfarin between 8:00 pm and bedtime.

What if I forget to take my warfarin?
If you forget to take your warfarin and you . . .

- **Remember later the same day**, take it as soon as you remember.

- **Do not remember until the next day**, do not take your missed day’s dose. Take only your regular dose for the current day and call your warfarin manager.

**DO NOT** take a double dose to make up for a missed dose. NEVER change your warfarin dose without first talking with your warfarin manager.
Lifestyle

Changes in your lifestyle can affect your INR. It is important to tell your doctor or warfarin manager about changes in the following:

Pregnancy/Breastfeeding

If used after the 6th week of pregnancy, warfarin has been associated with birth defects.

- If you are pregnant or think you may be pregnant, contact your doctor or warfarin manager immediately.

- If you want to become pregnant, talk to your doctor or warfarin manager.

- You may be able to breastfeed while taking warfarin. First, talk to your doctor or warfarin manager about this.

If you are pregnant or planning to become pregnant, notify your doctor or warfarin manager immediately.
Lifestyle

Surgical, Dental, and other Medical Procedures
If you are having ANY surgery, dental work, or other medical procedures, you may need to stop taking warfarin.

- Sometimes warfarin does not need to be stopped for:
  - routine dental cleanings
  - simple tooth extractions
  - some eye procedures

- Always tell the doctor or dentist who is doing your procedure that you are taking warfarin.

- Always tell your warfarin manager about the upcoming procedure.

- Always tell your warfarin manager if you are asked to stop taking warfarin.

If you stop taking warfarin for any procedure, make sure you have a plan for when to restart your warfarin.

Alcohol
Any amount of alcohol can increase your chance of serious bleeding while taking warfarin. If you drink alcohol, please be honest with your warfarin manager about how much and how often you drink. Binge drinking or drinking more than 2 drinks a day greatly increases your chance of bleeding. Please tell your warfarin manager if you drink more alcohol than usual.

1 alcohol drink equals:
12 oz. beer
or
5 oz. wine
or
1.5 oz. liquor
Lifestyle

Exercise/Sports
Changing the amount of activity you do can change your INR. Tell your warfarin manager if you increase or decrease your daily activity.

A serious fall or injury, especially to the head, can be serious. These injuries can cause extensive bruising, bleeding, swelling, soreness, or headache. If any of these occur, tell your warfarin manager immediately. Do not play contact sports without talking to your doctor or warfarin manager first.

Medical Alert Identification
It is important to always:

- Wear a warfarin alert identification bracelet, watch, or necklace and/or
- Carry a warfarin alert identification card

Ask your local pharmacy or warfarin manager where to get a medical alert identification. If you are in an accident, the identification can alert the medical team that you are taking warfarin.
Lifestyle

Travel
If you plan to travel, tell your doctor or warfarin manager before you travel. You will need to make arrangements for blood tests, prescriptions, and how you can be contacted.

While traveling:
- Carry your medications with you at all times
- Do not put medications in checked baggage
- Do not leave your medications in the car

Sickness
Tell your warfarin manager if you develop:
- Vomiting, diarrhea
- Severe flu-like symptoms
- Infection
- Any major illness

Health Conditions
Tell your doctor or warfarin manager if you develop any new health condition, including:
- Crohn’s disease
- Liver dysfunction
- Thyroid dysfunction

Discuss any changes in your activity or health with your doctor or warfarin manager
Medications and Supplements

Many medications and supplements interact with warfarin, including:

- Prescription medications
- Over-the-counter medications
- Herbal supplements
- Natural remedies
- Nutritional supplements
- Vitamin K supplements or any vitamins that contain vitamin K

Do not take any of these medications without a doctor’s permission
Medications and Supplements

It is important to tell your warfarin manager if you start or stop any medication, including:

❖ Acetaminophen (Tylenol®) or products containing acetaminophen (Tylenol®) (if you are taking more than 2,000 mg per day)
❖ Amiodarone
❖ Antibiotics (all types)
❖ Aspirin
❖ Chemotherapy medications
❖ Cimetidine (Tagamet®)
❖ Clopidogrel (Plavix®)
❖ Ibuprofen (Motrin®, Advil®, Nuprin®)
❖ Naproxen (Aleve®)
❖ Ranitidine (Zantac®)

Always tell anyone who gives you ANY new prescription that you are taking warfarin

These products contain acetaminophen (Tylenol®),
• Percocet®
• Vicodin®
• Tylenol #3®
• Fioricet®
• Darvocet®
• Midrin®

READ ALL LABELS
Many other medications contain acetaminophen (Tylenol®), including cold and over-the-counter medications
Your Diet and Vitamin K

Vitamin K is important for a healthy diet. Warfarin works against vitamin K, so it is important to learn how much vitamin K is in the foods you eat. Changing how much vitamin K you eat can change how much warfarin you need to take.

Myth:
You cannot eat foods with vitamin K while you are on warfarin

Fact:
You can eat foods with vitamin K while on warfarin, but you should eat about the same amount of vitamin K every day

It is important to eat the same amount of vitamin K each day. Pay attention to portion size and serving size to know how much vitamin K you eat.
Your Diet and Vitamin K

Foods very high in vitamin K:
- Kale
- Frozen spinach

Foods high in vitamin K:
- Broccoli
- Brussel sprouts
- Mustard greens
- Scallions

Foods with a medium amount of vitamin K:
- Asparagus
- Cabbage
- Raw spinach

A detailed list of foods containing vitamin K is located in the Appendix on page 22.
Side Effects

What are the side effects of warfarin?
Some possible side effects are:

❖ Bleeding from small cuts that takes up to 10 minutes to stop
❖ Bleeding gums
❖ Bruising more than usual
❖ Menstrual bleeding (a period) that is heavier than normal
❖ Nosebleeds
❖ Red, pink, or brown urine
❖ Skin rash (rare)
❖ Hair loss (rare)
❖ Toes that are painful and turn purple or dark in color (rare)

If you have any of these side effects, please tell your doctor or warfarin manager.
Danger Signs

Call your doctor or warfarin manager immediately if you develop any of the following problems:

- Severe headache, confusion, weakness, or numbness
- Coughing up large amounts of bright red blood
- Vomiting blood
  *It may be bright red or look like coffee grounds*
- Bleeding that you cannot stop
- Fall or injury to your head
- Bright red blood in your stool
- Black or tar-like stools
- Bruises that just appear or grow larger
- Blood in your urine

The most common complication of warfarin is bleeding...

Please report ANY signs of bleeding to your doctor or warfarin manager.

Always call 911 for emergencies.
DO’s and DON’Ts

DO’s: What to DO

❖ DO watch for signs of bleeding
   *Tell your doctor or warfarin manager right away*

❖ DO tell your warfarin manager when you get sick, hurt, or have a cut that will not stop bleeding

❖ DO take your warfarin exactly as your warfarin manager tells you

❖ DO tell your warfarin manager about any other medicines you are taking or if you start or stop any other medication

❖ DO keep your appointments for your blood tests

❖ DO tell anyone giving you medical or dental care that you are taking warfarin

❖ DO wear your warfarin medical alert identification at all times

❖ DO keep warfarin out of the reach of children

❖ DO contact your warfarin manager if you have been to the Emergency Room or had a recent hospital stay

❖ DO contact your doctor or warfarin manager after any accident
DON’Ts: What NOT to Do

❖ DON’T take warfarin if you are pregnant or plan on becoming pregnant

❖ DON’T take any other medicines until you talk to your doctor or warfarin manager

❖ DON’T make large changes in your diet or activity

❖ DON’T make adjustments to your warfarin dose without talking to your warfarin manager

❖ DON’T take extra doses to catch up

❖ DON’T drink alcohol in excess
## Appendix

### Vitamin K Content of Foods

Foods are listed in alphabetical order in each category.

**VERY HIGH (>500 mcg/serving)**

<table>
<thead>
<tr>
<th>Serving</th>
<th>mcg/Serving *</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beet greens, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Collards, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Dandelion greens, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Kale, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Spinach, frozen, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Turnip greens, cooked</td>
<td>1 cup</td>
</tr>
</tbody>
</table>

**HIGH (200-500 mcg/serving)**

<table>
<thead>
<tr>
<th>Serving</th>
<th>mcg/Serving *</th>
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</thead>
<tbody>
<tr>
<td>Broccoli, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Brussels sprouts, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Mustard greens, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Onions, scallions, raw</td>
<td>1 cup</td>
</tr>
</tbody>
</table>

**MEDIUM (25-199 mcg/serving)**

<table>
<thead>
<tr>
<th>Serving</th>
<th>mcg/Serving *</th>
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</thead>
<tbody>
<tr>
<td>Artichokes, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Asparagus, frozen, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Blackberries, raw</td>
<td>1 cup</td>
</tr>
<tr>
<td>Blueberries, raw</td>
<td>1 cup</td>
</tr>
<tr>
<td>Broccoli, raw</td>
<td>1 cup</td>
</tr>
<tr>
<td>Cabbage, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Cabbage, raw</td>
<td>1 cup</td>
</tr>
<tr>
<td>Celery, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Cucumber, raw, w/peel</td>
<td>1 large</td>
</tr>
<tr>
<td>Endive, raw</td>
<td>1 cup</td>
</tr>
<tr>
<td>Green beans, canned</td>
<td>1 cup</td>
</tr>
<tr>
<td>Kiwi, raw</td>
<td>1 medium</td>
</tr>
<tr>
<td>Lettuce, iceberg</td>
<td>¼ head</td>
</tr>
<tr>
<td>Lettuce, Romaine</td>
<td>1 cup</td>
</tr>
<tr>
<td>Mung beans, raw</td>
<td>1 cup</td>
</tr>
<tr>
<td>Noodles, including egg, spinach</td>
<td>1 cup</td>
</tr>
<tr>
<td>Okra, frozen, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Parsley, raw</td>
<td>10 sprigs</td>
</tr>
<tr>
<td>Peas</td>
<td>1 cup</td>
</tr>
<tr>
<td>Pickles</td>
<td>1 pickle</td>
</tr>
<tr>
<td>Prunes, stewed</td>
<td>5 prunes</td>
</tr>
<tr>
<td>Pumpkin, canned</td>
<td>1 cup</td>
</tr>
<tr>
<td>Rhubarb, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Soybeans, cooked</td>
<td>1 cup</td>
</tr>
<tr>
<td>Spaghetti sauce, ready-to-serve</td>
<td>1 cup</td>
</tr>
<tr>
<td>Spinach, raw</td>
<td>1 cup</td>
</tr>
<tr>
<td>Tuna fish, light, canned in oil</td>
<td>3 oz</td>
</tr>
<tr>
<td>Mixed vegetables, frozen, cooked</td>
<td>1 cup</td>
</tr>
</tbody>
</table>

*The amount of vitamin K is measured in micrograms (mcg)*

**NOTE:** Foods with less than 25 mcg of vitamin K do not need to be counted.

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**Myth:**
You cannot eat foods with vitamin K while you are on warfarin.

**Fact:**
You can eat foods with vitamin K while on warfarin, but you should eat about the same amount of vitamin K every day.

Reference:
Helpful References and Web Links

❖ North American Thrombosis Forum
   http://www.natfonline.org

❖ Agency for Healthcare Research and Quality: Your Guide to Taking Coumadin®/Warfarin Therapy
   http://www.ahrq.gov/consumer/coumadin.htm

❖ National Institutes of Health

❖ Clot Care Online Resources
   http://www.clotcare.com

❖ National Alliance for Thrombosis and Thrombophilia
   http://www.stoptheclot.org

❖ Point-of-Care Self-Testing Devices for Patients
   http://www.poc.roche.com/coaguchek/home.do
   http://www.itcmed.com

❖ Information on Medical Alert Bracelets, Watches, and Necklaces
   http://www.medicalert.org/home/Homegradient.aspx
   http://www.americanmedical-id.com
   http://www.laurenshope.com

❖ American College of Chest Physicians Evidence-Based Clinical Guidelines (8th Edition)
   http://www.chestjournal.org/content/133/6_suppl/299S.full.pdf+html