

Warfarin Care Clinic

Nursing Home Residents - Warfarin care patients monitored by QML Pathology

The QML Pathology Warfarin Care Clinic is lead by Specialist Pathologists, and a team of medical practitioners and health professionals specifically trained in warfarin management.

We believe that this patient is being cared for by nursing staff while living in your residence. Please contact us **IMMEDIATELY** when/if the following patient is no longer under your care.

Date: ____ / ____ / ____

Patient D.O.B.: ____ / ____ / ____

Patient Surname: _____

QML Pathology ref no: _____

Patient First Name: _____

LMO: Dr _____

WARFARIN AND RESULTS

Once patients have had their INR blood collected, we will endeavour to either phone and/or fax the results to you within 24-36 hours. We recommend that the patient continue taking their usual dose of warfarin until we contact you. Please contact us if we do not contact you first.

We strongly advise that the patient stay on a single brand of warfarin, i.e., Marevan or Coumadin, and not use mixtures of these brands. Whilst both contain warfarin, they are not bioequivalent and changes between the two formulations consistently cause problems with the INR levels.

NOTIFYING US OF CHANGES

It is most important that the Warfarin Care Clinic be notified immediately with any changes:

- Any changes in prescribed and non-prescribed medication that last longer than 3 days (including herbs and vitamins)
- Commencement of antibiotics or analgesics
- Any relevant changes to the patients health, e.g., new medical conditions or health deterioration
- Admission to or discharge from hospital
- Alterations to warfarin dosage by any other doctor/s.

With any of the above changes the patient will need an INR blood test (if not already due) to confirm the INR remains in the safe therapeutic range. The QML Pathology Haematologist needs to be provided with any of the above changes prior to the dosing of an INR result.

HOSPITAL ADMISSIONS AND DISCHARGES

QML Pathology is not responsible for warfarin control once a patient becomes admitted into hospital. Prior to or once discharged, the patient will need to be reinstated on the Warfarin monitoring program. Short stays or minor procedures may be exempt from this process. Patients discharged from

hospital who are prescribed LMWH must remain under the care of the hospital, or be referred to their doctor until LMWH is ceased and INR returns to therapeutic range.

The QML Pathology Haematologist requires information on this admission, such as health changes, medication changes, recent INRs and warfarin doses. Contact the discharging hospital to obtain a discharge summary which includes recent INR's and Warfarin doses. Contact the Warfarin Care Clinic and supply this new information and plan the next INR test as soon as possible.

REQUEST FORMS AND RULE 3 EXEMPTIONS

For Medicare to continue to Bulk Bill a new request form must be supplied every six months for INR testing, signed by the patient's primary doctor. One-off FBC and E/LFTs should also be requested at this time. After the Rule 3 form has been received, QML Pathology will post out a Rule 3 card. You or the collector can use this card to complete an internal 'QML Pathology Warfarin Request Form', which is used at each INR blood test. Please complete the answers to all questions on this form. The collector may give you some blank forms or you can obtain a copy of the form on our website: qml.com.au/WarfarinCare.aspx.

FURTHER INFORMATION

For further information please contact:

WARFARIN PATIENT REGISTRATION

(Doctors, pharmacist and nursing staff):

P: 1300 795 355, F: 07 3121 4335 or

E: warfarin@qml.com.au

Monday to Friday: 8.00am to 5.00pm

WARFARIN SUPPORT SERVICE (Patients):

1300 661 963 or warfarincare@qml.com.au

Mon to Fri: 10.00am to 3.00pm, Sat: 10.00am to 1.00pm

Note: we cannot supply you with your results via email.

qml.com.au

 **QML Pathology**

Specialists in Private Pathology since the 1920s