

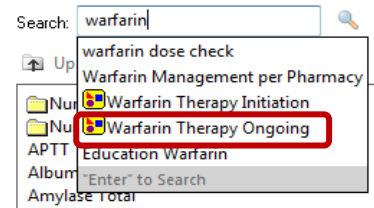




EMR Quick Reference Guide

Medications - Warfarin – Prescribing Ongoing Therapy (For continuing Warfarin Therapy in Patients Currently Taking Warfarin)

1. Click on **Orders** and click **+ Add**
2. Type Warfarin in the 'Search' field.
3. Select the **Warfarin Therapy Ongoing** order set (indicated by )
4. Review the pre-checked orders and select any other orders as necessary. Complete the mandatory fields for any orders with  icon



Warfarin Therapy Ongoing (Initiated Pending)		
Medications		
Review Warfarin dosing parameters for patients with MECHANICAL valves in situ		
For CONTINUING warfarin therapy: CHECK which brand the patient is taking. If unable to ascertain, select Coumadin and refer for ward pharmacist review		
COUMADIN		
<input type="checkbox"/>	<input checked="" type="checkbox"/> warfarin (Coumadin)	Select an order sentence
<input type="checkbox"/>	<input checked="" type="checkbox"/> warfarin (Coumadin)	Select an order sentence
MAREVAN		
<input type="checkbox"/>	<input checked="" type="checkbox"/> warfarin (Marevan)	Select an order sentence
<input type="checkbox"/>	<input checked="" type="checkbox"/> warfarin (Marevan)	Select an order sentence
warfarin dose check		
The 'included' warfarin dose check task ensures nursing staff check that there is a warfarin order for each day.		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> warfarin dose check	1 dose check, daily
Withhold Warfarin Dose		
<input type="checkbox"/>	<input checked="" type="checkbox"/> warfarin (Coumadin)	WITHHOLD, Oral, Tablet, daily dose(s)
<input type="checkbox"/>	<input checked="" type="checkbox"/> warfarin (Marevan)	WITHHOLD, Oral, Tablet, daily dose(s)
Warfarin Reversal		
Warfarin Reversal Guidelines		
BRIDGING ANTICOAGULATION		
Warfarin Bridging. Review when INR 2.0, Cease when INR 2.0 or greater		
<input type="checkbox"/>	<input checked="" type="checkbox"/> enoxaparin	Select an order sentence
Pathology		
Please specify the time and date of specimen collection		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> International Normalised Ratio (INR)	Spec Type: Blood, Anticoagulant: Warfarin Continuing Warfarin Therapy

<u>1</u>	Warfarin	Select brand of warfarin that patient is usually taking (unless withheld) Two order sentences are available for patients who are on alternate day dosing regimens. Ensure correct start date/times have been entered for both orders.
<u>2</u>	Warfarin Dose Check	The warfarin dose check order is placed to task nurses to check if a current warfarin order exists.
<u>3</u>	Withhold Warfarin dose	Select this order sentence if warfarin dose is to be withheld. Right-click and modify order sentence to specify duration of 'withheld' dose.
<u>4</u>	Bridging Anticoagulation	Bridging enoxaparin can be ordered if required.
<u>5</u>	INR Pathology Order	INR blood test pathology order – right click and modify to specify the time/date of specimen collection

5. Check the **Order Details** for Warfarin order.

Details for warfarin (Coumadin)

Details Order Comments Offset Details Diagnoses

*Strength dose:
 Freetext dose:
 Drug Form: Tablet
 *Duration:
 First Dose Date / Time: AEDT
 Stop type:
 Infuse over unit:
 *Indication: Atrial fibrillation
 Approval Number:

*Strength dose unit: mg
 *Route of administration: Oral
 *Frequency: daily
 *Duration unit: day(s)
 Priority: NOW
 Patient's Own Meds: Yes No
 *INR Target: 2.0 - 3.0
 Special Instructions:

Warfarin is ordered with a **finite** number of days. Enter the number of days until the dose is to be reviewed. Therefore there is a "Warfarin Dose Check" order for the nurse to ensure warfarin orders have been updated daily.

Warfarin dose administration time will default to the next 1600 hrs. If the order is placed AFTER 1600, change the 'Priority' field to NOW. This will schedule the day's dose and continue at 1600 daily thereafter.

6. Right-click and **modify** INR pathology order to specify the collection priority and Date/Time of collection.

Details for International Normalised Ratio (INR)

Details Order Comments Offset Details Diagnoses

*Collection Priority: Routine
 Collection Date/Time: AEDT
 Rule 3 Exemption:
 Copy Results to Dr2:

7. Click and enter '**Current Clinical History**'.

Current Clinical History (Mandatory)

Atrial Fibrillation

General Clinical History (Optional)

8. Click on and enter your password.

9. Check the **MAR** to ensure order(s) are correct.

Ordering alternative dosing regimens

Example: "I take Warfarin 5mg and 5.5mg on alternate days"

1. Select both order sentences in the order set

<input checked="" type="checkbox"/>		warfarin (coUMADIN)	▼	Select an order sentence
<input checked="" type="checkbox"/>		warfarin (coUMADIN)	▼	Select an order sentence





2. Enter in a **dose** and **change the frequency** of one order from daily to e.g. **THREE times a week (Mon, Wed, Fri)**

- SIX times a week (except on (a) Mon)
- SIX times a week (except on (b) Tue)
- SIX times a week (except on (c) Wed)
- SIX times a week (except on (d) Thu)
- SIX times a week (except on (e) Fri)
- SIX times a week (except on (f) Sat)
- SIX times a week (except on (g) Sun)
- TDS
- TDS (on an empty stomach)
- TDS (with or after food)
- THREE times a week (Mon, Wed & Fri)
- THREE times a week (Tue, Thu & Sat)
- times a week (Mon, Wed & Fri) ▼

3. Enter in a **dose** and **change the frequency** of the second order from daily to e.g. **FOUR times a week (Tue, Thu, Sat & Sun)**





4. Click on

5. Review orders - check the ***First Dose Date/Time** for both orders

Medications					
		warfarin (Coumadin)	Order	23/10/2018 16:00	5 mg, Oral, Tablet, FOUR times a week (Tue, Thu, Sat & Sun) for 5 day(s), First dose 23/10/2018 16:00 AEDT,
		warfarin (Coumadin)	Order	24/10/2018 16:00	5.5 mg, Oral, Tablet, THREE times a week (Mon, Wed & Fri) for 5 day(s), First dose 24/10/2018 16:00 AEDT,

6. Click and enter your password

7. Check the and ensure the two orders do not start on the same day

Medications		23/10/2018 16:00
Scheduled		
		5 mg
warfarin (Coumadin)		Not given within 5 days.
5 mg, Oral, Tablet, FOUR times a week (Tue, Thu, Sat & Sun) for 5 day(s), First dose 23/10/2018 16:00:00, Stop date 28/10/2018 15:59:00, INR Target: 2.0 - 3.0, Indication: Atrial fibrillation		
warfarin		
INR		
		
warfarin (Coumadin)		
5.5 mg, Oral, Tablet, THREE times a week (Mon, Wed & Fri) for 5 day(s), First dose 24/10/2018 16:00:00, Stop date 29/10/2018 15:59:00, INR Target: 2.0 - 3.0, Indication: Atrial fibrillation		
warfarin		
INR		