

WARFARIN EDUCATION

- Please review if you patient have had recent education about Warfarin and their follow up INR review
- Check which Warfarin Brand they are taking at this time

VTE Prophylaxis Section

- Medical Staff need to complete this
- Check not completed on other charts
- Check for other anticoagulants
- If no action required this must be acknowledged
- NURSES please check this is completed

Mechanical Prophylaxis Section

- Nursing Staff need to implement clinical intervention e.g. calf compression stockings or calf compressors

TRIAL NIMC - EXAMPLE ONLY

Attach ADR Sticker

ALLERGIES & ADVERSE REACTIONS (ADR)

Drug (or other) Reaction / Type / Date Initials

None

Sign: *Smith* Print: SMITH Date: 18.2.16

URN: 123456

Family name: PATIENT

Given names: YOUR

Address: YOUR

Date of birth: 11/106 Sex: M F

First prescriber to print patient name and check label correct: *PATIENT, YOUR*

Weight (kg): 70.5 Height (cm):

REGULAR MEDICATIONS

YEAR 20 16 DATE & MONTH 18 19 2 2

VARIABLE DOSE MEDICATION

Date	Medication (Print Generic Name)	When Level taken	Drug level
18.2.16	WARFARIN (Marevan/Coumadin)	AM	INR Result
		PM	

WARFARIN EDUCATION RECORD

Patient educated by: _____

Sign: _____

Date: _____

Given Warfarin book: _____

Date: _____

RECOMMENDED ADMINISTRATION TIMES GUIDELINES ONLY

Time	Units	Time	Units
Morning	0800	1800 or 2000	
Night	2000		
Twice a day	0800 2000	2000	
3 times a day	0800 1400 2000		
Regular 8 hourly	0600 0800 1000 1200 1400 1600 1800 2000		
Regular 6 hourly	0600 0800 1000 1200 1400 1600 1800 2000		
4 times a day	0600 1200 1800 2200		

INSULIN ORDERS

Check supplemental/variable/flat orders

Contact HMO if BGL out of range

Meatime insulin is given at start of meal

YEAR 20 16 DATE & MONTH 18 19 2 2

Time/Meal	Name of Insulin	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units
0600	NOVORAPID	6																		
1230	NOVORAPID	6																		
1730	NOVORAPID	6																		
0800	LANTUS	20	20																	

Supplemental subcutaneous insulin

Variable dose (sliding scale) insulin alone is NOT recommended - consider basal insulin requirements. If unsure, seek advice.

Name of insulin	Frequency	Time	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units	Units
NOVORAPID	With meals only	1730	4																	

REASON FOR NURSE NOT ADMINISTERING

Codes 1-5 to be circled

Absent (A)

Fasting (F)

Refused - Notify Doctor (R)

Vomiting (V)

On Leave (L)

Not available - obtain supply or contact Dr (N)

Withheld - enter reason in clinical record (W)

Self administering (S)

New Insulin Sub-cut order section

- Nurses to complete administration as per five rights of administration
- Date and sign and write amount of insulin administered in the date & month section

New Supplemental Subcutaneous insulin section (variable order prescription)

- Nurses to complete administration as per five rights of administration
- Date and sign and write amount of insulin administered in the date & month section
- Nurses need to review this section in conjunction with Blood Glucose

New Supplemental Subcutaneous insulin section (variable order prescription)

- Please enter the date, time, number of units and initials post administration (pertaining to the amount insulin administered off this order)

Teaching Aid Number 1 – National Inpatient Medication Chart Key Messages:

- Medication administration needs to be reviewed at bedside handover each shift
- Venous Thrombosis Emboli Prophylaxis assessment needs to be completed by Medical staff and signed off
- Nursing intervention needs to be completed and signed off each shift or change of condition
- Sub-cut insulin medication orders need to be handed over during bedside handover and signed off each administration including units administered, as well as time and date
- Supplemental orders need to be reviewed and administered as per the Blood Glucose Monitoring Level Chart and in conjunction with medical review if required

References:
 Western Health Procedure, (2014). Drug Prescription, Supply, Storage and Administration, downloaded May 5th 2016.
 Western Health Procedure, (2014). Adult Venous Thromboembolism Prevention, downloaded May 5th 2016.
 Western Health Procedure, (2014). Insulin Prescribing, Supply, Storage and Administration, downloaded May 5th 2016.