UConn Health John Dempsey Hospital Department of Pharmacy

To: Licensed Independent Practitioners at UConn Health John Dempsey Hospital
From: UConn Health John Dempsey Hospital Department of Pharmacy
RE: Warfarin Collaborative Practice Launch Week of December 14, 2015
Date: November 20, 2015

Pharmacist-Driven Warfarin Collaborative Practice

Starting the week of December 14th, the Pharmacy Department Warfarin Collaborative Practice Protocol will be live. This protocol allows pharmacist-driven warfarin dosing in adult inpatients, excluding patients receiving warfarin status post orthopedic surgery. The purpose of this protocol is to optimize the efficacy and safety of warfarin use at JDH through collaboration between providers and pharmacists with a standardized protocol based on current peer-reviewed literature**. Prescribers will have the ability to order warfarin from either prescriber-dosed or pharmacist-dosed warfarin order sets at the point of computerized prescriber order entry (CPOE).** The provider-dosed order set will look similar to the warfarin order set currently in CPOE. The pharmacist-dosed order set (*Figure 1*) will require providers to select an initial dose with an INR goal range and indication *(Figure 2).*

Prescriber Responsibilities

Per the collaborative practice protocol, when pharmacist-dosed warfarin is ordered, prescribers will:

- Order in CPOE with an initial dose, INR goal range, and warfarin indication
- **Discontinue warfarin if treatment options and/or plan of care changes.** If holding dose for one day, discontinue the dose order and place a "Warfarin NO Dose Today" order. If patient no longer needs warfarin dosed daily, discontinue **all** warfarin related orders (i.e. dose, INR range, warfarin daily dose call RX).
- Maintain the ability to dose warfarin, by discontinuing all WCP orders and reentering orders as provider-dosed.
- Maintain responsibility for all other anticoagulation needs (i.e. non-warfarin therapy) and discharge warfarin needs (i.e. outpatient INR draws and discharge prescriptions).

Pharmacist Responsibilities

Pharmacists have completed education and demonstrated competency in the management of warfarin. Per the collaborative practice protocol, when pharmacist-dosed warfarin is ordered, pharmacists will:

- Dose warfarin primarily on the day shift. Orders placed for WCP on the evening and overnight hours will have the initial dose be evaluated by the pharmacist, with the full consult for follow-up doses completed on the day shift.
- Ensure appropriate monitoring of PT/INR and CBC, and will order these per protocol as needed.
- Notify the prescriber of elevated INRs, any signs of bleeding, any signs of thrombosis, or any clinical concerns.
- Contact providers for clarification if any warfarin dose orders are placed, beyond the initial dose, for patient enrolled in WCP.

Figure 1. Pharmacist Dosed Warfarin Order Set

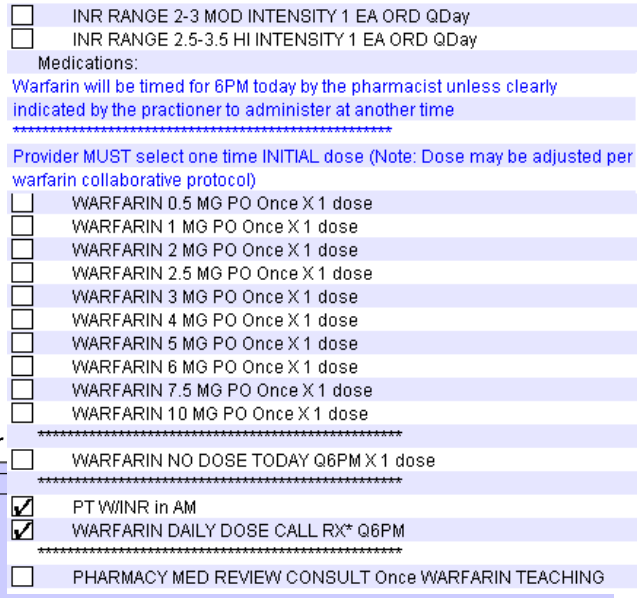

Figure 2. Select Warfarin Indication in Range Order