

**Telephone communication for resident on warfarin**

Scenario 3: Mrs. Rivera, Dr. Hinsky

Date: 8/17/07 Time: 6:30 pm

Originator of call: STATE NAME I am calling about warfarin patient <resident name >, one of Dr. <MD name>'s patients at <nursing home>.  
 The issue I am calling about (select from the following options) is:

<p><b>New INR Result</b></p> <p>INR result:</p> <p>_____</p>	<p><b>Change in Condition</b></p> <p><input type="checkbox"/> fall with potential injury</p> <p><input type="checkbox"/> skin tear with potential complication</p> <p><input type="checkbox"/> fever</p> <p><input type="checkbox"/> ANY bleeding or bruising</p> <p><input type="checkbox"/> other injury:</p> <p><input type="checkbox"/> other medication issue:</p> <p><input checked="" type="checkbox"/> abnormal UA test results</p> <p><input type="checkbox"/> abnormal chest Xray results</p> <p><input checked="" type="checkbox"/> other, specify: POSSIBLE UTI</p>	<p><b>Fall without injury/ Minor skin tear</b></p> <p><input type="checkbox"/> fall</p> <p><input type="checkbox"/> no injury noted</p> <p><input type="checkbox"/> no bleeding/bruising</p> <p><input type="checkbox"/> skin tear</p> <p><input type="checkbox"/> no redness noted</p> <p><input type="checkbox"/> no drainage</p> <p><input type="checkbox"/> size: apx ____ cm</p> <p>If calling for one of these situations, skip to the Recommended Action section</p>	<p style="font-size: 2em; font-weight: bold;">S</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">ituation</p>
--	---	---	---

↓

Last 2 INR test results

INR Date	INR	Dosing Pattern	Date from	Date to
<u>8/2/07</u>	<u>2.5</u>	Current <u>3</u> mg per day ____mg	<u>7/26/07</u>	<u>NOW</u>
<u>7/26/07</u>	<u>1.9</u>	Previous <u>2</u> mg per day ____mg	<u>7/5/07</u>	<u>7/26/07</u>

Indication for warfarin:  AFIB  DVT/PE  MECHANICAL HEART VALVE  OTHER \_\_\_\_\_

Other important medications the resident is taking (including past 3 days):

antibiotics:

NSAIDs (e.g. ibuprofen, motrin, piroxicam, indocin, meloxicam, etc):

aspirin or Plavix (clopidogrel)

B

ackground

↓

No concerns

I'm uncomfortable about this patient because:  high INR  bleeding/bruising  other

low INR

SHE IS ON WARFARIN; ANTIBIOTICS FOR UTIs CAN INTERACT WITH WARFARIN

A

ssessment

↓

**Say what you think would be helpful or needs to be done, which might include:**

No new orders needed

**INR/Warfarin Recommendations**

Tell me if the warfarin dose should be changed or held

Tell me when to repeat the INR  In 3 days?  In 7 days?  Other?

**Other Recommendations**

Tell me whether to order an antibiotic

If so, should we adjust the warfarin dose?

When should we schedule the next INR test?

Tell me whether to order other tests

Should we send the patient to the emergency department?

**When do you want us to call again (or under what conditions)?**

R

ecommended Action

Based on Nurse Assessment

ENTER ALL ORDERS DIRECTLY ONTO THE PHYSICIAN ORDER SHEET

**Response from MD or office**

Who responded: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_