Blood Thinner Pills: Your Guide to Taking Warfarin

Your health depends on knowing how to take this medicine the right way.

- Read this entire booklet.
- Keep it in a safe place. You may need to review it.
- Family members or others who care for you should read it, too.

Name _____________________________

Your diagnosis is _____________________________

Your doctor is _____________________________

Your INR range is _____________________________

If you have questions, ask the provider or nurse you see in the clinic.
Call _____________________________ 8 a.m. to 5 p.m. weekdays.

**After hours and on weekends**
Call Telephone Nurse Advisor
(608) 775-4454 or (800) 858-1050

You can also contact us through MyCare. Sign up for a secure account at mycare.gundersenhealth.org or call (608) 775-0303 or (800) 362-9567, ext. 50303.
You can watch a video titled “Staying Active and Healthy with Blood Thinners” in any Gundersen Health System patient education library from 8 a.m. to 4:30 p.m. weekdays. This video is also available in Spanish.

- John & Nettie Mooney Library – La Crosse (Hospital, Level 1)

You can watch this video on the Internet at gundersenhealth.org/patiented

Click on the link “Staying Active and Healthy with Blood Thinners.”

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Warfarin (WAR-fur-in) is a type of anticoagulant (an-tih-koh-AG-you-lant). This medicine slows your body’s ability to clot blood. Warfarin will not dissolve clots that have already formed. It will help prevent new clots from forming or keep clots you already have from getting larger. Warfarin is the generic name for one of the most often prescribed oral blood thinners. The drug is also known as Coumadin® or Jantoven®.

**Why do I need to take this medicine?**

Blood clotting is normal when you are cut or injured. However, blood clots that form for no reason can be fatal. There are a number of reasons why an anticoagulant like warfarin is needed. Your doctor may prescribe this “blood thinner” for one of these reasons:

**Deep vein thrombosis** (throm-BOH-sis) or **DVT**. Blood clots can form in veins deep inside your leg. Clots can damage blood vessels in your leg or break loose and damage organs.

**Pulmonary embolism** (PUHL-muh-ner-ee EM-boh-lizm) or **PE**. A clot that formed in some other part of your body can break loose and move through the blood to your lungs. The clot then gets stuck within a vessel that brings blood to the lungs. If lungs cannot get enough blood, they will be damaged. You could stop breathing.
After joint replacement – Knee, hip, or other joint

Blood clot in an artery in the brain

• **Stroke.** When a clot cuts off blood flow to part of the brain, you can have problems with speech, vision, thinking or movement. You may be at a higher risk for a stroke if you have had a heart attack.

• **Transient ischemic (tran-zee-uhnt / ih- SKEE-mik) attack or TIA.** A clot briefly blocks a small blood vessel in the brain and then passes through. There may be shortterm symptoms such as a dizzy spell, blurred vision or confused speech. One or more TIAs may precede a severe stroke.

Atrial fibrillation (AY-tree-uhl / fi-bruh- LEY-shuhn) or A fib. Sometimes your heart will beat too fast or out of rhythm. You may or may not feel this.

Heart attack. When a section of heart muscle dies, this is called a heart attack. This can happen when clots block one or more vessels that carry blood to the heart.

Heart valve issues

• **Heart valve disease.** Four valves keep blood flowing in the right pathway through your heart. Like doors, they swing open to let blood pass through. Clots may form in a diseased valve and damage the heart or other organs.

• **Heart valve replacement.** An artificial valve can replace a diseased or damaged one. The material the new valve is made of may cause blood to stick and form clots.

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**This is a “High Alert” medicine**

Extra steps are needed to keep you safe while you take it. Bleeding is a major risk factor since warfarin keeps blood clots from forming.

**Call your doctor right away if any of these occur:**

• Cuts and nosebleeds do not stop bleeding
• Gums bleed after tooth-brushing
• Bruises form for no reason
• Chills
• Being tired all the time
• Having a fever for no reason
• Increased menstrual flow
• Vaginal bleeding not linked with a period
• Sore throat
• Stomach pain that is new or gets worse
• Urine looks dark brown or red
• Stools look black or tarry
• Odd pain, swelling, or discomfort
• Severe headache
• Blurred vision
• Feeling confused
• Loss of coordination (balance)
• Loss of muscle strength
• Loss of feeling in hands or feet
• Broken blood vessels just under skin

For your safety, take warfarin exactly as you are told. Keep all blood test appointments.

Taking the right amount of warfarin

Your doctor will decide what dose of warfarin you need based on results of a blood test called an International Normalized Ratio (INR). Take this medicine at the same time each day, with or without food. We recommend you take warfarin in the evening. Your doctor or nurse will tell you how many pills to take. Your dose may stay the same or change after each blood test (INR).

The number of milligrams (mg) is stamped on each pill. Pills are color coded to show their strength. Your doctor will prescribe one of these:

- 1 mg – Pink
- 2 mg - Lavender
- 2.5 mg – Green
- 3 mg - Tan
- 4 mg - Blue
- 5 mg – Pale orange (peach)
- 6 mg – Blue-green
- 7.5 mg - Yellow
- 10 mg – White
Check pills after each refill. If they do not look like those you have been taking, talk to the pharmacist. A center line makes it easy to cut pills in half so you can adjust your dose.

**Blood testing while on warfarin**

INR tests are required to adjust the level of warfarin in your blood. The INR test shows how thick (more likely to clot) or thin (less likely to clot) your blood is. INR range varies from patient to patient. You must have INR tests to insure you take the right amount of warfarin.

For your safety, you may have more frequent tests when:
- You start to take warfarin.
- You have changes in your health or diet.
- There are changes in other medicines you take.
- INR results are not within the range set by your doctor.
- You have a procedure or surgery or must stay in the hospital for any reason.

For your safety, the longest time allowed between INR tests is 4 weeks.

**Missing a blood test**

If you miss your INR test, there is no way to know if your dose is still correct. You could take too much warfarin and have bleeding problems because your blood is too thin. You could bleed to death. Taking too little warfarin could increase risk of blood clots, heart attack or stroke because blood is too thick.

You and your doctor must decide whether warfarin is the right medicine for you.

| Too little warfarin may cause a blood clot | Your INR range | Too much warfarin may cause bleeding |
Talk with your doctor if any of these reasons might keep you from having INR tests when you should.

- It costs too much money.
- It is too hard to get to the clinic.
- I do not have time to get tested.
- I cannot get excused from work.
- I know my own body. I don’t feel sick enough to keep getting this test.
- I am too sick to go to the lab.
- Blood tests hurt.

If you do not have blood tests when they are scheduled:

- Your doctor may reduce your dose to the lowest safe amount. This may be below the level he or she thinks is best for your long-term health.
- You may be given prescriptions you can renew only when you come in for an INR.

When and where do I get my blood tested?

If your INRs are done at a Gundersen lab:

Have blood drawn before 12 p.m. (noon) at the clinic where you receive care. If you have an order slip from your doctor, bring it with you. Later that day, someone will call to tell you:

- Your INR test result, whether it is within the range set by your doctor
- Your warfarin dose, whether it stays the same or changes
- Your next INR test date

If you are not called by 2 p.m. on the day of your test, call your doctor. After hours and on weekends, call Telephone Nurse Advisor at (608) 775-4454 or (800) 858-1050.

Have blood drawn before your clinic closes in the afternoon on your INR day. You will be told how and when you will get test results.

Note: If you are not going to have blood tests at a Gundersen Health System clinic, you will get special instructions.
**Missing a dose**

If you miss one dose, take it as soon as you remember if it is on the same day. If you remember the next day, skip the dose you missed. **Do not double the dose to catch up.** This could increase your risk for bleeding. Keep a record of missed doses to give to your doctor or nurse. Call your doctor if you miss 2 or more doses in a row.

**Warfarin and other medicines**

Over-the-counter (OTC) products, herbs, vitamins and supplements can change how warfarin affects your blood. **Avoid OTC products that contain nonsteroidal anti-inflammatory drugs** such as ibuprofen (Advil®, Motrin®), naproxen (Naprosyn®), Aleve®) or nabumetone (Relafen®).

Make sure the doctor who prescribes your warfarin knows what else you take. Tell him or her when any other doctor prescribes new medicine. Each person you see for health care of any kind should be told that you take warfarin. Keep a list of all your medicines with you.

**If you already take daily doses of aspirin for any reason**, keep taking it until you talk with your doctor. He or she may adjust the dose while you are on warfarin. **Do not** take new medicine that contains aspirin such as:

- Excedrin®
- Alka-Seltzer®
- Pepto Bismol®
- Some OTC cold medicines

Ask your doctor or pharmacist if you are not sure.

**If you do not take aspirin on a regular basis**, avoid aspirin and products that contain it unless approved by your doctor. Products to avoid include:

- Alka-Seltzer®
- Excedrin®
- Pepto Bismol®
- Some over-the-counter cold medicines

Ask your doctor or pharmacist if you are not sure.
Eating and drinking can affect INR

Eat the same kind and amount of food as you did before you started to take warfarin. This helps keep your INR steady. Change your diet slowly. Do not eat much more (binge) or much less (crash diet to lose weight) than usual.

Vitamin K helps blood clot. It is one of the main reasons to balance your diet and make slow changes in what you eat. Vitamin K in your food can affect your medicine dose. **Tell your provider:**

- If you drink a lot of green tea
- If you eat large amounts of high vitamin K foods:
  - Asparagus
  - Kale
  - Broccoli
  - Cabbage
  - Cucumber peel
  - Green scallions
  - Mustard greens
  - Brussels sprouts
  - Parsley
  - Spinach
  - Turnip greens
- **Before** you start or stop using an over-the-counter diet or vitamin/mineral supplement. Some tablets and liquids contain vitamin K.

If it is not in your folder, you can request a handout titled **Vitamin K: Sources and Portion Sizes for Patients Who Take Blood Thinners.** It is a guide to high, medium and low vitamin K foods and portion sizes.

Alcohol can change the effects of warfarin. If your doctor says you can drink alcohol, do not drink more than he or she allows.

Others should know you take warfarin

- Tell doctors and nurses in other Gundersen Health System departments.
- Tell all healthcare staff who care for you.
- Tell your dentist and the person who cleans your teeth.
• Tell your pharmacist. Newly prescribed medicine or an over-the-counter product might affect your warfarin.
• Tell your family. Let them read this booklet and watch the video.

Your health care record is private. Doctors and nurses cannot talk to any other person about your care unless you permit this in writing. You can complete a form in your doctor’s office. Staff may then give information over the phone to a designated family member, friend or home health aide.

Ways to help prevent bleeding

Watch what you do, eat, and take

Do these:
• Make your home safe. Place furniture and remove throw rugs to reduce risk of falls.
• Get plenty of rest.
• Ask for help with walking if you are not steady on your feet.
• Call your doctor or nurse if you have any symptoms listed under “High alert” medicine on p. 2.
• Be more careful if work or activities could cause cuts or bruises.

Do not do these:
• Eat much larger or much smaller amounts of green, leafy vegetables and canola oil than you did before warfarin was prescribed.
• Take aspirin or medicines with aspirin in them. Ask your pharmacist if you are not sure.
• Take any medicines or herbal products unless you check with your nurse or provider. Many can thin your blood or change the way blood thinners work. This can put you in danger.
**Protect your skin**

**Do these:**
- Shave with an electric razor.
- Use a nail file for nail care.
- Put pressure on any cuts for at least 5 minutes. Put ice on new bruises or wounds.
- Check your skin each day for new cuts, bruises or other wounds. Watch for a red skin rash (also known as petechiae [peh- TEEK-KEE-eye]). This rash looks like tiny red dots. It happens most where clothing rubs the skin – like at the waist.
- Call your doctor or nurse if:
  - A cut does not stop bleeding after you apply pressure.
  - A bruise gets bigger.
  - You see a red rash.

**Do not do these:**
- Use a razor with a blade.
- Use sharp scissors, needles, or other tools that could injure you.
- Go barefoot.
- Join in activities where you could get bumps, falls or cuts.
- Get a shot or a treatment that uses a needle until you have talked with your doctor or nurse.
- Wear tight-fitting clothes, elastic sleeves or rough fabrics.

**Protect your mouth**

**Do these:**
- Eat soft foods.
- Use a soft toothbrush.
- Keep your lips moist. Use lip moisturizer as needed to prevent dry or cracked lips.
- Inform your dentist you are on a blood thinner.
- Check your mouth every day for bleeding.
- Call your doctor or nurse if:
  - You have odd or heavy bleeding from the gums.
Do not do these:
- Use dental floss, an electric toothbrush or toothpicks.
- Have dental work done without making the dentist aware you are on a blood thinner.
- Wear ill-fitting dentures or retainers. Remove them to rest your mouth at least 8 hours a day.

**Protect your stomach and intestines**

Do these:
- Drink plenty of liquids, exercise and eat a healthy diet to avoid constipation. Walking also builds muscles to help protect the joints.
- Ask your doctor for a stool softener or laxative if you need them.
- Take measures to prevent vomiting if you have nausea. Request anti-nausea medicine.
- Call your doctor or nurse if:
  - Your vomit is bloody or looks like coffee grounds.
  - You have constipation, dark tarry stools or blood in your stool.

Do not do these:
- Injure fragile rectal tissue. Avoid enemas, suppositories or harsh laxatives.
- Use a rectal thermometer.
- Strain during bowel movements. If you must strain, talk to your doctor or nurse about what you can do.

**Protect your breathing pathways**

Do these:
- Add moisture to dry air, especially in the winter.
- Watch for a nosebleed after you sneeze. If you have a nosebleed, sit up and tilt your head forward. Apply pressure and ice to the nose and the back of the neck.
- Call your doctor or nurse if:
  - You cough up any blood.
  - You have a nosebleed that lasts for longer than 10 minutes.
Do not do these:

- Blow your nose hard.
- Have a treatment done unless you have told the doctor you are on a blood thinner.

Prevent blood clots or deep vein thrombosis (DVT)

- Do not sit for long periods of time. Get up at least once each hour. Walk around more often if you can.
- Do not cross your legs or ankles when you sit.
- Eat a healthy diet. Maintain a healthy weight. Exercise within your limits.
- If you smoke, stop. Ask for help to quit. We offer good programs with great results.
- Wear your compression stockings if your doctor or nurse prescribed them.
- Raise your legs when sitting or lying down. This helps blood return to the heart.
- When you travel, move legs, ankles, and feet often. Go for short walks as often as you can. Sitting for long periods of time allows blood to pool in your legs.

Traveling

Tell your doctor before you travel for more than 7 days. Be sure you have enough medicine for the trip.

- Keep medicine in your purse or carry-on bag. Do not put it in a suitcase that will be checked if you take a plane, train or bus.
- Take medicine at the same time each day, as you do at home.
- Keep close to the same diet.
- If you see a doctor or dentist while you travel, tell them you are taking warfarin.
- Wear a medical ID bracelet, band or tag.
**Warnings**

Keep your medicine out of reach of children.

**Warfarin can cause birth defects.** Women of childbearing age should use effective birth control while on warfarin. A woman who becomes pregnant while taking this medicine should contact her doctor right away.

Always wear a medical ID bracelet, band or tag. If you are injured and cannot speak, emergency medical personnel must know you take warfarin. Most pharmacies sell these. Carry a card in your wallet with warfarin information.

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**The BEST way to take warfarin**

Follow the BEST approach each day for a healthy and active life:

- **Be** careful
- **Eat** right.
- **Stick** to a routine.
- **Test** regularly.

**Remember:**

- Take your blood thinner as directed by your doctor.
- Go for INR blood tests when they are scheduled.
- Never skip a dose.
- Never take a double dose.

Keep this booklet. Refer to it when you have questions or concerns. If you cannot find the answer to your question, ask the doctor or nurse you see in the clinic about this medicine.

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**When to contact your doctor**

This medicine will not make you bleed for no reason. Tell your doctor when any of these happen:

- You bruise more easily.
- Your nose or a cut bleeds for more than 10 minutes.
- Your gums bleed more than usual.
- You see blood after you cough.
• Your vomit is bloody or looks like coffee grounds.
• You have a heavier period.
• You have unexpected vaginal bleeding.
• Your urine is red or dark brown.
• Your bowel movements are red or black.
• You have trouble breathing.
• You get dizzy or have headaches.
• You fall or hit your head.
• You become sick with a fever, flu or an infection.
• You vomit or have diarrhea.
• It is difficult for you to eat.

Contact information

8 a.m. to 5 p.m. weekdays
Call the number on the cover of this booklet.

After hours and on weekends
Telephone Nurse Advisor
(608) 775-4454 or (800) 858-1050.

For more general information on any health care topic
The John & Nettie Mooney Libraries and the Stanek Cancer Library provide current health information from expert sources. On our website (www.gundersenhealth.org/libraries) you can:
  • View titles of books and DVDs you can borrow.
  • Link to websites we trust and recommend.
For help finding answers to your questions or signing up for MyCare, call or email:
  • (608) 775-5995 or (800) 362-9567, ext. 55995
  • mooneylibrary@gundersenhealth.org
  • La Crosse (Level 1, Lobby) or East Building (Level 2, Waiting Area)
# Warfarin Dosage Calendar

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