



Your Guide to Coumadin®/Warfarin Anticoagulation Therapy

You may or may not be discharged on Coumadin®/Warfarin (C/W) following surgery. This pamphlet is your guide to C/W therapy.

If you are discharged from the hospital on C/W and have questions, please contact St. Croix Orthopaedics (SCO) at 800-423-1088 or 651-439-8807 then press 7.

If you have questions about C/W interacting with any medications you currently take, please contact your family physician or pharmacist.



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What is C/W and Why is it Prescribed?

C/W is an anticoagulant medicine that will help prevent blood clotting. Sometimes this drug is called a “blood thinner” because it helps your blood flow easier. Your surgeon has prescribed this medication to help prevent blood clots from forming in your legs.

A possible complication after any surgery is tiny blood clots that can form in leg veins. This complication can cause deep vein thrombosis (DVT). Contact your physician immediately if you develop swelling, redness, and pain in the calf or thigh that does not go away.

In some cases these clots can travel to your lungs and cause a pulmonary embolism (PE). Call 911 if you develop shortness of breath or chest pain.

How to Take C/W



The dose of C/W each person needs to take is different.

- Take the C/W as prescribed.
- Take C/W at the same time each day.
- Never skip a dose. If you miss a dose within a few hours, take it as soon as possible then go back to your schedule.
- If you do not remember until the next day, do not take the missed dose and do not double the next dose.

Monitoring Your Dosage



The dose is monitored by taking blood tests called INR (International Normalized Ratio). The INR measures how fast your blood is clotting. If your INR level is too high, you might be at risk for bleeding. If it is too low, you might be at risk for forming clots. The dosage of medication you take may change based on the results of the INR blood tests.

NOTE: If you currently take Coumadin®/Warfarin, talk to your family doctor about dosing before and after surgery. Your family doctor will continue monitoring your INR levels after your surgery.

At the time of your hospital discharge, you will be instructed when to have your INR blood tests. The first INR generally occurs within a few days of discharge.

There are various locations to have your INR tests drawn. These may include a local hospital or clinic, pharmacy or a C/W clinic in your area. The location and monitoring of your INR test results will be discussed at the time of your hospital discharge.

Diet



The most important thing to remember is to eat what you normally eat and don't make any changes in your diet.

Note: Foods high in Vitamin K may affect how well C/W works. However, it is important that you do not change your normal vitamin K intake while taking C/W unless otherwise directed by a physician.

When to Call



If you experience...

- Bleeding that doesn't stop including nose bleeds that last more than 20 minutes
- Bowel movements that are red or look like tar
- Vomiting or coughing up anything bright red or coffee colored
- Severe headache, stomach or back pain
- Dizziness or faintness
- Sudden appearance of unexplained bruising

**Contact your surgeon's clinical assistant
800-423-1088 or 651-439-8807**

Call 911 if You Experience

- Chest pains or trouble breathing
- A serious fall or a blow to the head