

ANTICOAGULANT PT/INR MONITORING

Policy & Procedure

Policy:

It is the policy of this facility that residents on anticoagulation therapy will be monitored to assist in maintaining recommended laboratory parameters as established by the attending physician.

Procedure:

1. Residents receiving anticoagulation therapy may require regular monitoring of laboratory values including but not limited to PT/INR.
2. To initiate anticoagulation PT/INR tracking, review the resident's medical record to ensure anticoagulation therapy orders include a supporting diagnosis, appropriate dosage, desired INR range, and the parameters for physician notification of abnormal laboratory results.
3. The Medication Administration Record should reflect the:
 - a. Date of the most recent laboratory draw
 - b. The results of the most recent laboratory draw
 - c. Current medication and dose orders
 - d. Date of the next scheduled laboratory draw
 - e. Parameters for abnormal results and physician notification
4. With each medication administration opportunity, the nurse or med tech will review the Medication Administration Record to ensure consistency in medication dose orders, laboratory results are documented, the physician has been notified of laboratory results, and the next laboratory draw date is identified prior to administering the medication.
5. **DO NOT ADMINISTER THE MEDICATION IF LABORATORY RESULTS ARE NOT AVAILABLE ON THE DATE LABORATORY WORK IS TO BE DONE. ALWAYS HAVE RESULTS OF THE MOST CURRENT LABORATORY TESTS PRIOR TO ADMINISTERING ANTICOAGULANTS**
6. Licensed staff receiving laboratory results are required to update the MAR, notify the physician of results, and adjust dosage orders as necessary.
7. Tracking of PT/INR values will be maintained until the drug regime has been discontinued by physician orders.
8. Changes in dosage requires the entire medication order be discontinued and a new order be written. Highlight the discontinued order on the MAR, indicate the date of discontinuation and write the new orders in a separate space to prevent confusion.

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.

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9. Anticoagulation therapy requires close monitoring and each resident shall be continuously assessed for adverse drug reactions (ADR) such as bruising, bleeding gums, rectal bleeding (melena), bloody urine (hematuria), change in mental status, etc.
10. Any adverse reactions shall be reported to the attending physician immediately and documented in the medical record.

I have read, understand and agree to adhere to the requirements outlined in this policy and procedure.

Administrator Signature: _____ Date: _____

Medical Director Signature: _____ Date: _____

Review Dates: _____

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