## Warfarin: Guide for Patients and Families

### Why do I have to take warfarin:
- Warfarin is an effective medicine to prevent new blood clots and to keep existing ones from getting bigger. It does not dissolve existing clots. Your body does that naturally.
- A blood clot can slow or stop the flow of blood. Blood clots can cause pain in your legs (known as DVT) or chest (known as PE). Clots can also cause stroke, disability, or death. Prompt treatment is important.
- Warfarin may be used in people who have conditions such as:
  - Atrial fibrillation (irregular heart rhythm)
  - DVT (Deep Vein Thrombosis or a blood clot in a vein)
  - Heart attacks
  - Heart valve replacements
  - Pulmonary embolism (blood clot in your lung)
  - Stroke
  - Valvular heart disease (any problem with one of the four valves in the heart)
  - Pulmonary hypertension (high blood pressure in the arteries that supply the lungs)
- Warfarin is safe and effective if used carefully, but it’s a balancing act. Too much can cause a dangerous amount of bleeding; too little can allow new clots to form.

### Get your INR Blood Tests:
- Go for your INR blood tests at least once a month. Many people get tested as often as once a week when first started on warfarin.
- At every visit, always ask for your INR number and know what your target range is supposed to be. It may be 2-3; 2.5-3.5; or different depending on your physician’s wishes. An INR that’s too high shows more risk for bleeding. An INR that’s too low shows more risk of clots.
- The amount of warfarin you take may change when your INR changes. This will help keep your warfarin at the right level.

### Take the right medicines:
- Warfarin has other brand names, Coumadin® and Jantoven™. Do not take Coumadin® or Jantoven™ in addition to warfarin. This will double your dose and can be unsafe.
- Warfarin medicines are color-coded by strength. If you get a different color tablet than usual, ask your pharmacist. To simplify the process, it’s best to use just one pharmacy.
- Try to avoid taking other medicines that can make you bleed more easily. These include Motrin®, Aleve®, ibuprofen or naproxen.
- Aspirin can also make you bleed more easily; however, there are many medical conditions that may require you to take aspirin with your warfarin. Talk to your doctor about taking these medications together safely.
- Read all new medicine labels to make sure they don’t contain aspirin before using them. If you’re not sure, ask your doctor or pharmacist.
- Tylenol (acetaminophen) is usually OK to take, but check with your doctor first.
- If you miss a dose of warfarin, do not take an extra pill to “catch up”.
**Talk to your doctor:**
- Always ask if any new medicine is safe to take with warfarin. This includes prescribed medicines, especially antibiotics and over-the-counter medicines. It also includes vitamins, herbal supplements and nutritional supplements such as Ensure®, Boost®, or Slim-Fast®.
- Tell all your healthcare providers that you take warfarin. This includes your physician, nurse, dentist, chiropractor, naturopath and pharmacist. They all need to know.
- Stopping or changing the amount of your other medicines can also affect your warfarin.

**Alcohol and street drugs:**
- Alcohol can make you bleed more easily while taking warfarin
- If you do drink alcohol, limit your intake. In 24 hours, you should drink no more than:
  - One to two 12-ounce beers
  - One to two 6-ounce glasses of wine
  - One to two mixed drinks
  - One to two shots of hard liquor
- Binge drinking can significantly increase your INR and your bleeding risk
- Cocaine, heroin, marijuana and other street drugs can increase your risk of bleeding.

**Signs and symptoms of too MUCH warfarin:**
- Warfarin makes you bruise easily while taking warfarin. If you bump into something, apply pressure to the spot, or hold ice on it for 2 to 5 minutes.
- For a cut, put pressure on the area for 2 to 5 minutes. If you’re still bleeding in 20 to 30 minutes, or it’s a large cut, go right to the nearest Emergency Department. Tell them you take warfarin.
- If you get a nosebleed, do not hold your head back. Instead, hold your head in a normal upright position. Pinch your nose together just below the boney part and squeeze tightly for 2 to 5 minutes. If you’re still bleeding in 20 to 30 minutes, go to the nearest Emergency Department. Tell them you take warfarin.
- If you get nosebleeds easily, try using a humidifier and a saline nasal spray or gel. This can help keep your nose moist and prevent nosebleeds.

**Signs and symptoms of too LITTLE warfarin:**
- Sudden weakness in any limb
- Numbness or tingling anywhere
- Visual changes or loss of sight in either eye
- Sudden onset or slurred speech or inability to speak
- Dizziness or faintness
- New pain, swelling, redness or heat in an extremity
- New shortness of breath or chest pain

**Go straight to the Emergency Department if you:**
- Are in a vehicle accident or have a major fall, especially if you hit your head.
- Notice bright red blood in the toilet after you go to the bathroom, or if your urine turns smoky pink or red color
- Notice that your stools are black and sticky, like tar. They may also smell unusually bad.
- If you are throwing up dark or bloody colored stomach contents.
- Get a sudden and extremely painful headache. It might feel worse than any other headache in your life.
- Have symptoms similar to the last time you had a blood clot
- Briefly black out, can’t move, have trouble talking or become very weak—especially if you’re weak on only one side of your face or body. This could be a stroke.
Diet and Exercise:

- Some foods you eat contain vitamin K, which can work against the warfarin. The highest amount of Vitamin K (which helps the blood to clot) is found in foods such as dark green leafy vegetables, and some meats such as beef and pork liver.
- Keep your diet consistent in the amount of foods that contain vitamin K. It is important to eat about the same number of servings each week of these foods. It is not necessary to eliminate these foods from your diet completely.
- Pay particular attention to foods that are moderate to high in Vitamin K; you do not need to monitor your intake of foods that are low in vitamin K.
- Keep your exercise level regular.
- Maintaining regular daily activities including consistent eating and exercise habits will make it less likely to need to change your dose of warfarin.

<table>
<thead>
<tr>
<th>FOOD</th>
<th>PORTION SIZE</th>
<th>VITAMIN K</th>
<th>FOOD</th>
<th>PORTION SIZE</th>
<th>VITAMIN K</th>
</tr>
</thead>
<tbody>
<tr>
<td>Artichoke, Cooked</td>
<td>1/3 Medium</td>
<td>L</td>
<td>Kale</td>
<td>1 cup</td>
<td>H</td>
</tr>
<tr>
<td>Artichoke, Raw</td>
<td>1 Large</td>
<td>L</td>
<td>Kiwi fruit</td>
<td>1 cup</td>
<td>L</td>
</tr>
<tr>
<td>Asparagus</td>
<td>7 spears</td>
<td>M</td>
<td>Leeks</td>
<td>1 cup</td>
<td>L</td>
</tr>
<tr>
<td>Beans, green</td>
<td>½ cup</td>
<td>L</td>
<td>Mayonnaise</td>
<td>7 tablespoons</td>
<td>L</td>
</tr>
<tr>
<td>Beans, Lima</td>
<td>½ cup</td>
<td>L</td>
<td>Mushrooms</td>
<td>5 pieces</td>
<td>L</td>
</tr>
<tr>
<td>Beets</td>
<td>1 cup</td>
<td>L</td>
<td>Okra</td>
<td>½ cup</td>
<td>L</td>
</tr>
<tr>
<td>Beet greens</td>
<td>1 cup</td>
<td>H</td>
<td>Onion</td>
<td>2/3 cup</td>
<td>L</td>
</tr>
<tr>
<td>Black-eyed peas</td>
<td>1 cup</td>
<td>M</td>
<td>Parsley</td>
<td>1 ½ cup</td>
<td>H</td>
</tr>
<tr>
<td>Blackberries</td>
<td>1 cup</td>
<td>L</td>
<td>Parsnip</td>
<td>1 cup</td>
<td>L</td>
</tr>
<tr>
<td>Blueberries</td>
<td>1 cup</td>
<td>L</td>
<td>Peas</td>
<td>½ cup</td>
<td>L</td>
</tr>
<tr>
<td>Broccoli</td>
<td>½ cup</td>
<td>H</td>
<td>Pepper</td>
<td>1 pepper</td>
<td>L</td>
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<tr>
<td>Brussel Sprouts</td>
<td>1 cup</td>
<td>H</td>
<td>Potato</td>
<td>1 potato</td>
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</tr>
<tr>
<td>Cabbage</td>
<td>1 cup</td>
<td>M</td>
<td>Pumpkin</td>
<td>1 cup</td>
<td>H</td>
</tr>
<tr>
<td>Canola/Soybean oil</td>
<td>7 tablespoons</td>
<td>M</td>
<td>Radish</td>
<td>1 cup</td>
<td>L</td>
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<tr>
<td>Cauliflower</td>
<td>½ cup</td>
<td>L</td>
<td>Rhubarb</td>
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<tr>
<td>Celery</td>
<td>2 ½ stalks</td>
<td>L</td>
<td>Romaine lettuce</td>
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<tr>
<td>Chard</td>
<td>½ cup</td>
<td>H</td>
<td>Sauerkraut</td>
<td>½ cup</td>
<td>L</td>
</tr>
<tr>
<td>Chive</td>
<td>3 stalks</td>
<td>L</td>
<td>Spinach</td>
<td>1 cup</td>
<td>H</td>
</tr>
<tr>
<td>Coleslaw</td>
<td>½ cup</td>
<td>H</td>
<td>Squash</td>
<td>1 cup</td>
<td>L</td>
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<tr>
<td>Collards</td>
<td>1 cup</td>
<td>H</td>
<td>Sweet potato</td>
<td>1 cup</td>
<td>L</td>
</tr>
<tr>
<td>Corn</td>
<td>½ cup</td>
<td>L</td>
<td>Tofu (soy)</td>
<td>4 oz fried</td>
<td>L</td>
</tr>
<tr>
<td>Cucumber</td>
<td>1 cup</td>
<td>L</td>
<td>Tuna</td>
<td>3 oz</td>
<td>L</td>
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<tr>
<td>Dandelion greens</td>
<td>1 cup</td>
<td>H</td>
<td>Tomato</td>
<td>1 tomato</td>
<td>L</td>
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<tr>
<td>Eggplant</td>
<td>1 cup</td>
<td>L</td>
<td>Turnip</td>
<td>3 ½ oz</td>
<td>L</td>
</tr>
<tr>
<td>Endive</td>
<td>2 cups</td>
<td>H</td>
<td>Turnip Greens</td>
<td>1 cup</td>
<td>H</td>
</tr>
<tr>
<td>Grapes, red/green</td>
<td>1 cup</td>
<td>L</td>
<td>Watercress</td>
<td>3 cups</td>
<td>H</td>
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<tr>
<td>Iceberg Lettuce</td>
<td>1 cup</td>
<td>L</td>
<td>Mixed vegetables</td>
<td>1 cup</td>
<td>L</td>
</tr>
</tbody>
</table>

KEY: HIGH= 80-1000 ug/serving  MEDIUM= 48-80 ug/serving  LOW= 0-48 ug/ serving

- Eat as many low vitamin K foods as you like. For foods with medium to high amounts of Vitamin K, don’t eat more or less of those than you would normally do in a week.
- Ex: If you usually eat foods high in vitamin K three times a week, don’t suddenly change your diet and eat them every day. A steady diet is key. If you have any questions, contact your clinic provider.
- Other foods that are high in Vitamin K include supplement drinks including Boost®, Ensure®, and Slim-Fast®. These should be treated like one serving of a high vitamin K food.
- Other foods may actually increase your INR and increase your risk of bleeding. It is recommended to stay away from eating: grapefruit, cranberries, and mangos. This includes juices and supplements.
| What if I get sick: | • Acute illness will change your body’s response to warfarin.  
• An episode of heart failure, fever, flu, viral/bacterial infection, nausea and vomiting, or diarrhea can cause your INR to fluctuate and increase your bleeding risk.  
• If you experience any of these, contact your doctor or anticoagulation clinic.  
• Call the clinic when starting any new medications, even if you won’t be taking them for very long. This includes antibiotics, steroids, etc. |
|-------------------|--------------------------------------------------------------------------------------------------|
| What if I get pregnant: | • You should not take warfarin if you are pregnant or actively trying to become pregnant.  
• There are other, safer options for thinning blood if you want to or already have conceived.  
• Talk to your OB/GYN about alternatives to prevent harm to developing fetus. |

**Important Points to Remember:**

- Take your warfarin exactly as directed, at the same time each day.
- Your goal INR is most likely between 2-3 or 2.5-3.5. If you are below this range you are at greater risk of forming clots. If you are above this range, you are at greater risk for bleeding.
- Look for signs of bleeding or clotting and report them immediately.
- Notify your doctor or clinic of changes in your dietary vitamin K intake, activity level, or medications (including herbal products, vitamins and over-the-counter medicines).
- Call your doctor or clinic if you have a fever, diarrhea, vomiting, or loss of appetite lasting longer than one day.
- Limit alcohol to 1-2 drinks daily. Drinking 2 or more drinks can greatly increase your INR and increase your risk of bleeding.
- Tell each of your healthcare providers that you are taking warfarin, carry a wallet card, and consider getting an ID bracelet or necklace.
- Keep all appointments or call promptly to reschedule.
- Call the IRMC Coumadin Clinic at 772.563.4611 with any questions you may have. Operating hours are Monday through Friday 8-4. If we do not answer, leave a message and a staff member will return your call shortly.
What will change my INR?

You want to keep your number (INR) in your goal range, and consistency is key. Here are a few things that may alter your INR.

May Increase INR
- Less green leafy vegetables high in Vitamin K
- Alcohol
- Stress/Pain/Illness
- Doubling doses
- Certain Antibiotics
- Some other Medications
- Cranberry
- Mango
- Grapefruit

May Decrease INR
- Extra green leafy vegetables high in Vitamin K
- Tobacco
- Missing Doses
- Green Tea
- Liver
- Some supplements

If you have any questions about whether your medication is going to change your INR, give us a call and we will be happy to let you know.

Our direct telephone line: 772-563-4611.