

WARFARIN SCHEME

DAY	APTT (9-10A.M.) TARGET	HEPARIN DOSE	IF INR	WARFARIN DOSE GIVEN AT 5.00P.M.
1 START	2-3 ratio	as per APTT	<1.4	10mg
2		as per APTT	<1.8 1.8 >1.8	10mg 1mg 0.5mg
3	2-3 ratio	as per APTT	<2.0 2.0-2.3 2.4-2.7 2.8-3.1 3.2-3.4 3.5-4.0 >4.0	10mg 5mg 4mg 3mg 2mg 1mg Nil
4		STOP HEPARIN When INR = or > 2.0 for two days	<1.4 1.4 1.5 1.6-1.7 1.8 1.9 2.0-2.1 2.2-2.3 2.4-2.6 2.7-3.0 3.1-3.5 3.6-4.0 4.1-4.5 >4.5	Predicted maintenance >8mg 8mg 7.5mg 7mg 6.5mg 6mg 5.5mg 5mg 4.5mg 4mg 3.5mg 3mg Nil then 2mg Nil for two days and then 1mg

At discharge send copy of in-patient anticoagulant record to Haematology and ensure patient has a yellow booklet, completed with patient and dosage details and OP anticoagulant appointment date, place and time.