



Title	<i>Initiation of Warfarin</i>
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Reviewed by	<i>NHS Borders Anticoagulation Committee – Dec 2022</i>
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Uncontrolled when printed

WARFARIN

Initiation of warfarin

The Fennerty regimen is only for rapid initiation of warfarin (caution in elderly) and is valid for the first 4 days of warfarin treatment only.

Day	INR (morning)	Warfarin (mg)(give at 5-7pm)
1	Less than 1.4	10
2	Less than 1.8	10
	1.8 Greater than 1.8	1 0.5
3	Less than 2.0	10
	2.0 – 2.1	5
	2.2 – 2.3	4.5
	2.4 – 2.5	4
	2.6 – 2.7	3.5
	2.8 – 2.9	3
	3.0 – 3.1	2.5
	3.2 – 3.3	2
	3.4	1.5
	3.5	1
	3.6 – 4.0	0.5
	Greater than 4.0	0
		Predicted maintenance dose
4	Less than 1.4	>8
	1.4	8
	1.5	7.5
	1.6 – 1.7	7
	1.8	6.5
	1.9	6
	2.0 – 2.1	5.5
	2.2 – 2.3	5
	2.4 – 2.6	4.5
	2.7 – 3.0	4
	3.1 – 3.5	3.5
	3.6 – 4.0	3
	4.1 – 4.5	Miss 1day then give 2mg
Greater than 4.5	Miss 2 days then give 1mg	

NHS Borders Guidelines for reversal of patients on warfarin and for the use of Beriplex can be found on the Intranet – click on link below:-

<http://intranet/resource.asp?uid=33406>

Safe prescribing of warfarin at time of discharge:

Before discharge ensure the patient is given a completed yellow anticoagulant booklet, counselled about warfarin (contact pharmacist), and ensure **timely** notification to GP. Please ensure that the appropriate section on the immediate discharge summary is completed

Target INRs and ranges

Indication	INR Range (Target INR)	Duration
Venous thrombosis Acute treatment and secondary prevention	2.0-3.0 (target INR: 2.5)	See Duration of Anticoagulation
Non-valvular Atrial Fibrillation (AF) Paroxysmal or permanent AF		
All patients with AF who have CHADS ₂ or CHA ₂ DS ₂ -VASc of ≥1	2.0-3.0 (target INR: 2.5)	Long term
AF associated with a) clinical thyrotoxicosis b) non-cerebral thromboembolism	2.0-3.0 (target INR: 2.5)	a) Until controlled b) Long term
Elective cardioversion	2.0-3.0 (target INR: 2.5)	Minimum 3 weeks pre procedure Minimum 4 weeks post procedure Ongoing requirement as directed by cardiologist.
Valvular Atrial Fibrillation Heart valve disease		
Rheumatic mitral valve disease and mitral stenosis	2.0-3.0 (target INR 2.5)	Long term
Mechanical heart valves Target INR depends on site of valve replacement, position and manufacturer. Target INR and range should be stipulated by the cardiologist/cardiac surgery team	Surgeon dependent - as per guidance from local cardiac surgery unit	Lifelong – follow guidance from cardiac unit
Aortic valve	2.5 – 3.0	
Mitral valve	2.5 – 3.5 (specific INR target recommended by surgeon)	
Patients requiring anticoagulation and antiplatelet therapy	2.0-3.0 (target INR 2.5)	As prescribed by consultant cardiologist/stroke physician/haematologist
Intracardiac thrombus	2.0-3.0 (target INR 2.5)	At least 3 months as prescribed by cardiology

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