

MEDICAL ASSISTANT GUIDELINES FOR MANAGEMENT OF NORMAL INR RESULTS

Please use the following guidelines when addressing normal INR results. These guidelines are for the medical assistants.

1. Medical assistants will only address “normal INR” results. A “normal INR” result is defined as a result, that is within the patient’s prescribed therapeutic goal range (i.e. if the target range is 2.0-3.0, the medical assistant may call back that result only if it is within that range). INR ranges are different for each patient. If an INR is outside of the range, the result should be forwarded to the Protime Nurses.
2. **CRITICAL STEP:** Before calling a patient, check the patient’s demographic notes for physician orders or important clinical/patient information. If a patient is preparing for a procedure, has special needs, or has any physician orders, forward the INR to a Protime Nurse. Also, if the patient is new to Coumadin, forward the INR to a Protime Nurse. Patients that are new to Coumadin, need their INR’s checked more frequently. For patients that need home draws, this information will be indicated in this area. Medical assistants may address home draws.
3. Each INR call should include the following:
 - Identify yourself and facility you are calling from. Discuss the purpose of the call. “I’m Glenda from NWOCC, and I’m calling back your Protime result from this morning.”
 - Review the result with the patient. “Your INR was 2.7 and your target range is 2.0-3.0. You are within your range.”
 - Review the patient’s tab type and size. “Do you have 2.5mg Coumadin tablets?”

- Review the patient's dose schedule. "I have that you are taking 2 tablets on Tuesdays and 1 tablet the rest of the days of the week. Is that correct?" Be sure to either speak in all "tablets" or in all "milligrams." Patients can become confused if instructions switch back and forth.
- If any of the above answers do not match what is in the Coumacare system, refer the call to a Prottime Nurse.
- For patients that have held doses on their prior schedule, fill in the zero with the lowest mg dose.

Example: INR was 2.3 and the pt's dose last week was :

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
2.5mg	5mg	2.5mg	0mg	2.5mg	5mg	2.5mg

Then the Wed dose should be filled in with the 2.5mg dose and the INR rechecked in two weeks. Do not leave zero milligram doses on the schedule. If you have any questions, refer the INR to the Prottime Nurse.

- Once all of the above information is complete, finish the call with instructions for a redraw date, (and tell the patient if you will be sending out the lab for a home draw, if it is indicated in the demographic notes). "Your next INR draw should be in 2 weeks." Remember that if the result is in range this time, and the prior INR was also in range, the next draw will be in 4 weeks. If the INR was in range this time, but the prior result was out of range, redraw in 2 weeks.

Prior INR	Current INR	Next Draw Date
In range	In range	4 weeks
Out of range	In range	2 weeks

Once again, if you have any questions, refer to the Prottime Nurse.

- If at any time, during the call, the patient has a question or comment, do not give instructions to the patient, but forward the call to the Prottime Nurses. Examples include: "I'm having surgery next week, and my

surgeon told me to hold my Coumadin for 2 weeks. Is that okay?" "I was started on Paxil, yesterday" "I had a bloody nose this morning." Take the INR result to the Protime desk and have the nurse address the result and the patient's question. Many things impact dosing or instructions for the next draw and need to be addressed by the Protime Nurses.

- Enter your result into the Coumacare system. When making entries into the Coumacare system, be sure that all of the information that you have entered is correct, and complete before you save the entry. Many entries have had missing INR results, no notes, or missing/incorrect doses. Please note that if something is not documented, it was not done.
 - Send a home draw order for the next INR draw, if appropriate, for that patient.
4. If you experience any errors or problems with the Coumacare Plus system, (i.e. unable to change a dose, duplicate patients, etc.), please notify someone to fix the problem. Do not leave a malfunctioning account for the next person to repair.
 5. When sending a new standing order to the lab, please do not reprint the old order. A new order must be generated with the current date.
 6. QA reviews will be conducted weekly, on a random basis, for all offices, to ensure quality of care.