

WARFARIN DOSAGE INITIATION GUIDELINES

Initiation of Warfarin:

should be at **5 mg/day** in most patients

A **starting dose of 2.5 mg** should be considered for patients with any of the **following risk factors:**

Age > 70, Wt < 50kg, CHF (uncompensated), liver failure, recent history of bleeding, recent surgery, Hct < 30, protime increased on admission, patient on interacting drugs, nutritionally depleted (NPO > 3 days) and patients with a history of falls

Contraindications

Absolute contraindications to warfarin are: The presence of a severe or active bleeding diathesis, non-compliance, first trimester of pregnancy,

Relative contraindications include: Uncontrolled hypertension (i.e. systolic >180 mmHg, diastolic >100 mmHg), severe liver disease and/or recent surgery involving the nervous system, spine or eye.

Therapeutic INR range

INR=2.0-3.0- Most indications for warfarin therapy,

INR= 2.5 – 3.5- Prosthetic heart valves, thromboembolism when INR already 2.0 – 3.0

Warfarin Loading (5 Mg Nomogram)		
Day	INR	Dosage (mg)
1	<1.5	5 mg
	1.5 – 1.9	5 mg
2	2.0 – 2.5	2.5 mg
	>2.5	1– 2.5 mg
	<1.5	7.5-10 mg
3	1.5 – 1.9	5 – 7.5 mg
	2.0 – 2.5	2.5 – 5 mg
	2.5-3.0	0-2.5 mg
	>3.0	0
4	<1.5	10 mg
	1.5 – 1.9	5 – 7.5 mg
	2.0 – 3.0	2.5- 5 mg
	>3.0	0
5	<1.5	10 mg
	1.5 – 1.9	7.5 – 10 mg
	2.0 – 3.0	2.5- 5 mg
	>3.0	0
6	<1.5	10 – 12.5 mg
	1.5 – 1.9	5 – 10 mg
	2.0 – 3.0	2.5 – 5 mg
	>3.0	0

Frequency of INR Monitoring

During the **induction phase-** INR should be **monitored every 1-3 days** (initially daily if on therapeutic heparin) until the INR is in the patient's target range for two consecutive values. **Follow up INR** should be performed frequently (**2-3 times a week**) to ensure that it remains in the patient's target range if any of the following happens: *intercurrent illness, medication change (including herbal), or significant diet change.*

Drugs That Can Diminish the Anticoagulant Effect of Warfarin Via Various Mechanisms	Drugs That Can Potentiate the Anticoagulant Effect of Warfarin Via Various Mechanisms	
Carbamazepine (Tegretol)	Aspirin	Fluconazole (Diflucan)
Cholestyramine (Questran)	Acetaminophen (Tylenol)	Gemfibrozil (Lopid)
Colestipol (Colestid)	Amiodarone (Cordarone)	Isoniazid
Cyclosporine (Sandimmune, Neoral)	Cefoperazone (Cefobid)	Itraconazole (Sporanox)
Dicloxacillin (Dynapen)	Cefotetan (Cefotan)	Ketoconazole (Nizoral)
Ethanol	Celecoxib (Celebrex)	Levofloxacin (Levaquin)
Griseofulvin (Grisactin)	Chloral hydrate	Metolazone (Zaroxolyn)
Nafcillin (Unipen)	Cimetidine (Tagamet)	Metronidazole (Flagyl)
Pentobarbital (Nembutal)	Ciprofloxacin (Cipro)	Voriconazole (veFend)
Phenobarbital	Clarithromycin (Biaxin)	Moricizine (Ethmozine)
Phenytoin (Dilantin)	Clofibrate (Atromid-S)	Norfloxacin (Noroxin)
Primidone (Mysoline)	Cotrimoxazole (Bactrim, Septra)	Ofloxacin (Floxin)
Rifabutin (Mycobutin)	Disopyramide (Norpace)	Omeprazole (Prilosec)
Rifampin (Rifadin, Rimactane)	Disulfiram (Antabuse)	Propafenone (Rythmol)
Sucralfate (Carafate)	Erythromycin	Thyroid Hormone (Synthroid)
	Fenofibrate (Tricor)	Trazodone (Desyrel)