



VENTURA COUNTY
HEALTH CARE AGENCY

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Owner: Jason Arimura: Director-
Pharmacy Services
Policy Area: Administrative - Patient Care
References:

100.087 Anticoagulation Management

POLICY:

This policy provides evidence-based recommendations that help ensure the safe and effective use of oral and parenteral anticoagulants for the prevention and treatment of various thrombotic disorders.

- A. Anticoagulant therapy shall be individualized to each patient.
- B. Clinical judgment shall be employed at the time of initiation, continuation and with the decision to stop anticoagulation.
- C. Anticoagulants that are packaged as oral unit-dose medications, pre-filled syringes, and pre-mixed infusion bags shall be used, when available, to minimize the risk of compounding and labeling errors.
- D. Anticoagulation Committee, Medication Error Reduction Improvement Team (MERIT) and Pharmacy & Therapeutics (P&T) Committee shall evaluate anticoagulation use, identify potential safety issues and modify any protocols and/or clinical practice guidelines addressed in this policy as needed.

PROCEDURE:

- A. Providers shall become familiar with the protocols and clinical practice guidelines addressed in this policy. Providers shall place orders for the desired anticoagulation therapy and relevant baseline labs.
- B. Pharmacists shall review and verify the physician order for appropriate indication, baseline labs, dosage and ensure appropriate monitoring takes place for the duration of anticoagulation therapy.
- C. Nursing staff shall review the seven rights of medication administration prior to administering any anticoagulant therapy. Continuous infusions shall be delivered via smart infusion pump using the appropriate guardrail information. A double check by a second nurse shall be performed and documented in the electronic health record for argatroban infusions, enoxaparin injections, fondaparinux injections and heparin infusions. For argatroban and heparin infusions, the medication and the smart infusion pump settings shall be double-checked at initiation of the infusion, with any rate changes, and when stopping or restarting the infusion.
- D. Nurses, pharmacists and providers share the responsibility to assess for signs and symptoms of bleeding and potential treatment failure (i.e. recurrent thrombosis).
- E. Adverse drug events, medication errors and near-misses of medication errors should be reported via the appropriate notification system.

ANTICOAGULATION MANAGEMENT PROTOCOLS & CLINICAL PRACTICE GUIDELINES

- A. Attachment A: Warfarin Protocol
- B. Attachment B: Heparin Protocol
- C. Attachment C: Low Molecular Weight Heparin Protocol
- D. Attachment D: Argatroban Infusion Protocol

All revision dates: 3/17/2020, 7/26/2017, 10/1/2016, 8/1/2015, 12/1/2010

Attachments

- [Attachment A - Warfarin Protocol.pdf](#)
- [Attachment B - Adult Heparin Infusion Protocol.pdf](#)
- [Attachment C - Low Molecular Weight Heparin \(Enoxaparin\) Protocol.pdf](#)
- [Attachment D - Adult Argatroban Drip Protocol.pdf](#)

Approval Signatures

Step Description	Approver	Date
Medical Executive & Oversight Committee	Tracy Chapman: VCMC - Med Staff	3/17/2020
P&T Committee	Jason Arimura: Director-Pharmacy Services	3/17/2020
Medical Executive Committee	Tracy Chapman: VCMC - Med Staff	12/12/2019
Hospital Administration	Diana Zenner: Chief Clinical Officer, QAPI and Patient Safety	11/12/2019
Nursing Administration	Michelle Sayre: Chief Nursing Officer	11/1/2019