Competency Evaluation Tool for ‘General Knowledge’ of Warfarin Sodium (Coumadin) Therapy

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| Trainer’s Printed Name: | | Date: | |
| Trainer’s Signature: | | Trainer’s Contact Information: | |
| General Knowledge Warfarin Sodium (Coumadin) Therapy Training Guidelines | | | |
| *The ‘General Knowledge’ Warfarin Sodium Therapy Training must be completed by a Qualified Trainer.* | | | |
| **Training Components and Procedure** | | | **Comments** |
| **At the conclusion of this training, the Certified staff:** | | |  |
| 1. | Knows where to locate the Service Provider’s Policy that outlines when an individual is receiving Warfarin sodium Therapy, the procedure to follow, and who will be responsible for administering Warfarin sodium. | |  |
| 2. | Knows that Warfarin sodium dosages received from an Anticoagulation Management Service must be  ordered by an authorized prescriber (i.e., Health Care Provider [HCP]). | |  |
| 3. | Knows that only licensed nurses and trained Certified staff may administer Warfarin sodium. | |  |
| 4. | Knows that the generic named product ‘Warfarin sodium’ (also known by the common brand name  COUMADIN®) is an anticoagulant used to prevent harmful blood clots from forming or growing larger and knows that using an anticoagulant causes the blood to take longer to form a clot. | |  |
| 5. | Knows the difference between ‘beneficial’ blood clots, (which prevent or stop bleeding) and ‘harmful’ blood clots, (which can cause a stroke, heart attack, deep vein thrombosis, or pulmonary embolism). | |  |
| 6. | Knows that when administering Warfarin sodium to follow the Medication Administration Process according to the MAP Regulations, Policies, and Curriculum. | |  |
| 7. | Knows that the goal of Warfarin sodium Therapy is to decrease the clotting tendency of blood and not to prevent clotting completely. | |  |
| 8. | Knows Warfarin sodium is administered once a day at the same time each day. | |  |
| 9. | Knows regular blood testing for the Prothrombin time (PT) and the International Normalized Ratio (INR) are required to ensure an adequate yet safe dose of Warfarin sodium. | |  |
| 10. | Knows if the INR is too low that blood clots will not be prevented; but, if the INR is too high, there may be an increased tendency for bleeding. | |  |
| 11. | Knows that unlike most medications that are prescribed as a fixed dose, Warfarin sodium dosing is adjusted to the INR blood test results and the Warfarin sodium dosage usually changes over time. | |  |
| 12. | Knows that Certified staff are not permitted to split the Warfarin sodium tablets and knows if splitting of a tablet is required to achieve the prescribed dosage that the tablet splitting must be done by the pharmacy. | |  |
| 13. | Knows that unlike most medications, Warfarin sodium is supplied as a color-coded tablet, based upon the strength of the tablet; as each Warfarin sodium tablet color represents a specific strength. | |  |
| 14. | Knows that certain conditions may affect the Warfarin sodium dosage (e.g., infections, diarrhea, indwelling catheter, uncontrolled high blood pressure, fever, etc.) and to consult with the HCP when there is a change  in the individual’s condition. | |  |
| 15. | Knows the Warfarin sodium dosage must be individualized and is based upon the individual’s medical condition, laboratory tests (e.g., PT, INR) and the individual’s response to treatment. | |  |
| 16. | Knows some Dietary Supplements and spices (e.g., ginger and garlic) may interact with Warfarin sodium, and to consult the HCP regarding the individual’s dietary needs. | |  |
| 17. | Knows some medications may interact with Warfarin sodium, and to consult with the HCP when a medication is started or stopped. | |  |
| 18. | Knows some foods (particularly leafy vegetables with large amounts of Vitamin K) may interact with Warfarin sodium, and to consult with the HCP regarding the individual’s dietary needs. | |  |
| 19. | Knows that Warfarin sodium interacts with Vitamin K in the body and knows the need to keep the individual’s Vitamin K intake consistent from day-to-day. | |  |
| 20. | Knows excessive use of alcohol may affect the metabolism of Warfarin sodium and knows to consult with the HCP regarding the individual’s alcohol usage, if applicable. | |  |

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| 21. | Knows that an individual receiving Warfarin sodium is at risk for bleeding. |  |
| 22. | Knows various ways to lower the chances of injury to the individual (e.g., using great caution with sharp objects, using an electric razor for shaving, using a soft-bristle toothbrush, using waxed dental floss, etc.). |  |
| 23. | Knows the effects of Warfarin sodium can be reversed with prescribed treatment (e.g., administration of Vitamin K) and knows to seek medical attention for the individual when warranted. |  |
| 24. | Knows the correct procedure for documenting Warfarin sodium Telephone HCP Orders, Telehealth HCP Orders, transcriptions, and administration of the medication. |  |
| 25. | Knows that when a second Certified staff is at the MAP Registered site, verification of the Warfarin sodium dosage is required prior to administration by the assigned Certified staff. |  |
| 26. | Knows that if a second Certified staff is not at the MAP Registered site when dosage verification is required, the Warfarin sodium medication should still be given. |  |
| 27. | Knows that if a second Certified staff is not at the MAP Registered site for dosage verification, that ‘NSS’ should be documented in the second staff verification block on the Medication Administration Record (MAR). |  |
| 28. | Knows if PT/INR testing is managed at the MAP Registered site, it is not to be done by Certified staff. |  |
| 29. | Knows how changes in Warfarin sodium dosage are communicated to all staff. |  |
| 30. | Knows the adverse effects of Warfarin sodium Therapy. |  |
| 31. | Knows when notification of the HCP is necessary. |  |
| 32. | Knows when a telephone call to Poison Control or 911 is necessary. |  |
| 33. | Knows that after Emergency Response personnel arrive and the individual is cared for, to notify appropriate persons, and to follow all emergency procedures per the Service Provider’s Policy. |  |
| 34. | Knows how to maintain an adequate supply of Warfarin sodium at the MAP Registered site. |  |
| 35. | Knows that Warfarin sodium must be ‘tracked’ (e.g., double key-locked and documented in the *Countable Controlled Substance Book*, etc.). |  |
| 36. | Knows if a single dose of Warfarin sodium is missed/omitted, the MAP Consultant must be notified. |  |
| 37. | Knows to contact a MAP Consultant for any questions or concerns regarding Warfarin sodium. |  |

Based on the General Knowledge Training Guidelines for Warfarin Sodium Therapy, I, as Trainer, have determined that the Certified staff named below have the knowledge to administer Warfarin sodium.

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