

Ambulatory Clinic Policy and Procedure

Title: ANTICOAGULATION MANAGEMENT	Policy Number: EP 3.11
Regulation Reference: Joint Commission NPSG 03.05.01	Effective Date: 06/2021

Policy Statement:

The purpose of this policy is to provide safe and effective management of anticoagulation therapy for Texas Tech Physicians of El Paso (TTP-EP) patients and to meet the National Patient Safety Goals for anticoagulation therapy established by The Joint Commission.

Scope and Distribution:

This policy applies and will be distributed to all Texas Tech Physicians of El Paso ambulatory clinics.

Procedure:

A. Reference Guidelines:

1. The Clinics adopt as evidence based anticoagulation management guidelines those published by the American College of Chest Physicians.
2. These are a reference for the initiation, dose adjustment, monitoring and side effect management of anticoagulation with vitamin K antagonists, direct oral anticoagulants and heparins (unfractionated and low molecular weight).
3. An internet based link to these guidelines is to be readily available to all providers in the Clinics Electronic Medical Record/s.
4. Individual Clinics may create reference tools (procedures, tables and/or algorithms) extracted from the guidelines and approved/signed by the Clinic Medical Director to facilitate their consistent application.

B. Education of patients:

1. All patients being initiated on anticoagulation will receive applicable education regarding medication risks and the importance of close monitoring and potential side effect reporting to the applicable provider/Clinic.
2. The Clinic or provider will document that education has been delivered.
3. Delivery of education will consist of verbal explanation. Additional methods such as approved Clinic or Professional Society hand-outs or referral to similar video or audio educational tools may be used.

C. Institutional oversight:

1. The Office of Quality Improvement will periodically inspect applicable Clinics in random samples for the following elements: knowledge of the link to the guidelines, approval by Medical Director of local tools for management and education, and documentation of education in the medical record.
2. The adequacy of anticoagulation therapy with warfarin will be monitored using baseline and periodic INR measurements. As an additional monitoring tool, aggregates of these INR measurements will be periodically collected as the EMR allows and classified according to their relation with the usual therapeutic range, and reported to the applicable Clinic/s for review.

D. Warfarin management Clinic/s:

1. Primary Care Clinics may create and operate a specific Clinic exclusively dedicated to monitor and adjust the dosing of warfarin based on the institution adopted guidelines.
2. Only patients with a Texas Tech Physicians of El Paso Primary Care physician may be referred to this clinic/s.



Ambulatory Clinic Policy and Procedure

3. Referrals must indicate indication, duration and target INR range for each patient.
4. All care, orders and prescriptions will be documented in the EMR. Basic documentation requirements will include but not be limited to vital signs, medication list update and review of food and drug allergies.
5. Should it become necessary to terminate a patient from this Clinic/s, clinic staff will follow policy EP 6.3, Termination of the Physician/Patient Relationship, and the patient will be referred to his/her Primary Care provider.

Policy Number: EP 3.11	Original Approval Date: 9/2013
	Revision Date: 6/2021
Signatory approval on file by: Juan Figueroa, MD Director of Clinical Operations Clinic Medical Directors Committee, Chair Texas Tech Physicians of El Paso	
	