El Paso - Ambulatory Clinic Policy and Procedure

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<th>Title: ANTICOAGULATION PROGRAM MANAGEMENT</th>
<th>Policy Number: EP 3.11</th>
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<td>Regulation Reference: Joint Commission NPSG 03.05.01</td>
<td>Effective Date: 9-2013</td>
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Policy Statement:

The purpose of this policy is to reduce the likelihood of patient harm associated with the use of anticoagulation therapy in the out-patient clinics and assure compliance with The Joint Commission Accreditation Standards for Ambulatory Care.

Scope and Distribution:

This policy applies and will be distributed to all TTUHSC-El Paso/Paul L. Foster School of Medicine clinics, also known as Texas Tech Physicians.

Procedure:

1. Patients may be referred for management of anticoagulation therapy from physicians at University Medical Center (UMC). Patients referred for anticoagulation therapy must be followed by an in-house physician.

2. A referral form will be faxed to the clinic and the patient will be given a copy of the referral to bring with them to their scheduled appointment. If the patient is physically in the clinic at the time of referral, a referral form will be completed in the Electronic Medical Record (EMR) by the referring physician.

3. The patient will be given an appointment in the Coumadin Clinic according to the physician’s orders.

4. At the patient’s first visit, the clinic staff will initiate patient/family education regarding anticoagulant usage, and the patient will be given the Anticoagulation Clinic Patient Education Packet.

5. The Patient Education Documentation form (EP 3.11A) for patients new to anticoagulation therapy will be completed at the time of the patient’s initial visit.

6. Every patient new to anticoagulation therapy will be asked to sign the Patient Responsibilities and Compliance Agreement (EP 3.11B).

7. Patients being initiated on anticoagulation therapy will have a baseline International Normalized Ratio (INR) taken.

8. Clinic staff working in the Coumadin Clinic will complete all the information pertinent to the Coumadin Visit on the EMR. Once the patient’s INR result is obtained, staff will complete all the information pertinent to the Coumadin Visit on the EMR.

9. The RN or physician will open the encounter and calculate dosage of Coumadin for the next visit.

   a. If the dosage is calculated by the RN, the note will be routed to the Coumadin proxy box for the attending physician’s review and signature.
10. Physician’s orders will be communicated to the patient and documented in the EMR. Prescriptions will be sent electronically to the pharmacy. The patient may request to have the prescription printed.

11. Patients being seen in the Coumadin Clinic will need to meet the same basic documentation requirements as any specialty or primary care visit to include but not be limited to vital signs, pain assessment, medication list update, review of food and drug allergies, etc.

12. If a patient fails to appear for a routine appointment in the Coumadin Clinic the following steps will be taken:

   a. The patient will be sent an automatic notice initiated by the IDX system asking them to call and schedule a new appointment.
   b. If the patient misses a second visit within any time period during their anticoagulation treatment, the ordering physician will be notified and an attempt will be made to contact the patient to set up a follow up appointment.
   c. All attempts to contact the patient will be documented in the EMR. Copies of any correspondence sent to the patient regarding their Coumadin follow up appointments will also be maintained in the EMR.

13. If a patient cancels their appointment and refuses to schedule another visit, the following steps will be taken:

   a. The patient will be sent a notice by regular mail regarding their missed visit. The letter will also alert them to the importance of monitoring their status and urge them to call the clinic to schedule a follow up appointment.
   b. The ordering physician will be notified of the patient’s failure to schedule a follow up appointment.

14. Should it become necessary to terminate a patient from the Coumadin Clinic, clinic staff will follow policy EP 6.3 and the patient will be provided with contact information for other Coumadin Clinics in the community.