

# Fact sheet

## 2024 Update to the Guideline for Warfarin Management in the Community

### Situation

The Queensland Guideline for Warfarin Management in the Community has been revised. The main changes include:

- referral to the Anticoagulant Guideline for Hospitalised Adult Patients and Warfarin drug interactions resources for most risk assessment information
- more frequent monitoring for patients with low thromboembolic risk indications
- patient education and example dose regimens moved to the appendices
- management of bleeding or overdose updated to align with the Queensland Health Anticoagulant Guideline for Hospitalised Adult Patients
- removal of perioperative information acknowledging that it is out of scope of this guideline
- addition of transition of care check lists as an appendix.

The URL for the revised guideline remains unchanged. It can be accessed via the Queensland Health Internet at [Medication safety | Queensland Health](#).

### Background

The Guideline for Warfarin Management in the Community was originally developed as a joint initiative of Queensland Health and the Royal Flying Doctor Service Queensland Branch in 2012. At the time, an end-of-bed guideline for warfarin management was readily available in Queensland public hospitals. It was identified that there was a lack of guidance for managing warfarin in community settings where patients are not necessarily seen every day and therefore the end-of-bed recommendations for initiating therapy with daily INR monitoring and dose adjustment may not be practical. Consequently, a request was made from a Royal Flying Doctor Service clinician to develop a guideline which included a low dose warfarin regimen with reduced frequency of INR monitoring and dose adjustment, as well as guidance for ongoing warfarin management in terms of INR monitoring frequency and dose adjustment suggestions.

### Assessment

The use of warfarin has gradually declined with the introduction of direct oral anticoagulants (DOACs) namely apixaban, rivaroxaban and dabigatran. However, warfarin remains treatment of choice for some indications such as mechanical heart valves and may be used for patients who are not tolerant to a DOAC. It is important to retain guidance regarding warfarin therapy noting that the declining use of this anticoagulant may lead to reduced familiarity with its monitoring, dosing and management of overdose or bleeding.

In 2022, a new resource titled [Anticoagulant Guideline for Hospitalised Adult Patients \(health.qld.gov.au\)](https://www.health.qld.gov.au) was published by Queensland Health on the internet. A degree of overlap was noted with the community warfarin guideline. This was considered in the recent community warfarin guideline review and content was replaced with hyperlinks to the overarching anticoagulant guideline or its appendices where relevant.

Feedback received regarding version 2.0 of the Guideline for Warfarin Management in the Community included a concern that the INR monitoring interval for initiating warfarin in patients with low thromboembolic risk indications was too long. This has been addressed in the revised guideline (version 3), with the monitoring interval following initiation of warfarin changing from day 8 to day 3 to ensure an earlier review of warfarin management.

The Queensland Guideline for Warfarin Management in the Community, version 3 includes the following information:

- Indications for prescribing warfarin including associated target INR and minimum recommended duration
- Risk assessments and other considerations
  - pregnancy and breastfeeding
  - assessment of bleeding risk
  - factors for increased sensitivity to warfarin
- Different regimens for initiating warfarin
  - patients with low thromboembolism risk (e.g. stroke prevention with atrial fibrillation)
  - patients with high thromboembolism risk (e.g. venous thromboembolism)
- Recommended frequency of INR monitoring
- Recommendations for dose adjustments for maintenance therapy
  - example scenarios in the appendices
- Management of bleeding or overdose
- Patient education
- Transition of care checklists
  - ongoing warfarin management
  - parenteral anticoagulants for bridging therapy.

## Issued by

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