



Good Practice G															
	Warfarin Administration Chart														
W	hen usin	g th	is cha	rt, w	rite 'See	Warfarin Administration Chart' on main MAR-DO NOT DOUBLE RECORD.									
Person's Name:						Dat	Date of Birth:				Room No:				
GP/Anticoagulation clinic details:															
Warfarin therapy started						Indication									
Check d		date	date of next test is not overdue on each occasion of administration												
Dosage	informa	atio	n – IN	R te	esting:										
Date of I	NR test	I	INR		Do	sage regin	ne Presci	ribed		Date of	next INR	Recorded b	y Chec	ked by	
				Refer to Yellow Anti-coagulant Bool											
						nt written confirmation letter casion of administration.									
								dose (mg)	) to						
				be	given on	each day	of the	week).							
							per of tablets of each								
Day	Date		Dos	e -	strength administered for dose  0.5mg					Administered by		Time	Sign	Signed	
					White	1mg Brown	3mg Blue	5mg Pink							
											-		-		

MOVP-020 V4 Good Practice Warfarin Administration Chart – MO0523-08	Approved date:02/05/2023	Review date: 02/05/2025
©Developed by NHS North of England Care	Status Approved	