

## Patient Agreement Community Anticoagulation Therapy (CAT) Clinic

Patient name: \_\_\_\_\_

To maintain enrollment in the CAT Clinic I will:

### Labs

- Have INRs drawn on scheduled dates
- Have INRs drawn before 10:00 AM. This is so the CAT Clinic receives my lab results and, if needed, can talk with my doctor.
- Be available on lab draw days so the CAT Clinic nurse can inform me of the results of my INR and dose changes of my warfarin/Coumadin.
- If I have not heard from the CAT Clinic nurse by 5 pm, I will take my normal dose of warfarin/Coumadin and call the CAT Clinic the next business day for further instruction.

### Warfarin/Coumadin

- Follow orders for my warfarin/Coumadin and how to take it. I will **not** self-adjust my warfarin/Coumadin dose.
- Tell the CAT Clinic by noon of the next day if:
  - I start a new drug (even over-the-counter drugs).
  - A current drug dosage is changed or stopped.
- Tell The CAT Clinic staff in advance of dental work (not teeth cleaning), surgery, and other invasive tests such as colonoscopy or biopsies. My doctor may tell me to stop taking warfarin/Coumadin for several days before the test and start again after the test. The CAT Clinic nurse is not responsible for following patients when warfarin/Coumadin is changed for tests.

### Other

- Participate in education provided by the CAT Clinic staff
- Keep all scheduled appointments with my doctor
- Keep scheduled lab draw dates
- Give the CAT Clinic staff a telephone number
- Call my doctor for medical problems or drugs that do not have to do with my warfarin/Coumadin treatment

I have read the above information and agree to all of the above items.

Please sign, date, and bring to your appointment.

Patient signature: \_\_\_\_\_ Date: \_\_\_\_\_

Referring doctor: \_\_\_\_\_