



Anticoagulant Nursing Home Adverse Drug Event CHECKLIST

Resident ID Number: _____ Resident Name: _____

Admission Date: _____ Resident Age: _____

Discharge Date: _____ Date: _____

BLEEDING RELATED TO ANTITHROMBOTIC MEDICATION USE

Risk Factors:

- Anticoagulant, antiplatelet or thrombolytic medication use
- Concurrent use of more than one antithrombotic medication (e.g., use of aspirin while on anticoagulants)
- History of stroke or GI bleed
- NSAID medication use while on anticoagulants
- Antibiotics use while on anticoagulants
- Amiodarone use while on anticoagulants
- Dietary changes affecting vitamin K intake (e.g., dark leafy greens, Boost, Ensure)

Signs & Symptoms:

- Elevated PT/INR, PTT
- Low platelet count
- Bruising
- Nosebleeds
- Bleeding gums
- Prolonged bleeding from wound, IV or surgical sites
- Blood in urine, feces or vomit
- Coughing up blood
- Abrupt onset hypotension

Clinical Interventions:

- Stat order for PT/INR, PTT, platelet count or CBC
- Administration of Vitamin K
- Abrupt stop order for medication
- Transfer to hospital

Probing Questions:

- Does the medical record include documentation of clinical indication?
- Is there evidence the facility routinely monitors lab results of all residents on anticoagulant/antiplatelet therapy?
- Is there a system to ensure lab results, including PT/INR, are appropriately communicated to the physician, including when panic values are obtained?
- Is there evidence that the facility educates caregivers on risk factors and symptoms and signs that may be indicative of excessive bleeding due to antithrombotic medications?
- Are residents/families educated regarding the risks associated with antithrombotic medication use and the signs and symptoms of excessive bleeding?
- Is there evidence of a system to alert prescribers and nursing staff when anticoagulants are combined with other drugs that increase the risk of bleeding?
- Does the resident's dietary plan include recognition of foods that interact with antithrombotic medications (e.g., is there a plan to ensure consistent intake of foods and beverages rich in Vitamin K for residents on warfarin)?

THROMBOEMBOLISM RELATED TO ANTICOAGULANT MEDICATION USE

Risk Factors:

- Anticoagulant medication used
- Prolonged immobility
- Recent major surgery
- Prior history of venous thromboembolic events
- Consistently subtherapeutic PT/INR

Signs & Symptoms:

- Pain or tenderness and swelling of upper or lower extremity
- Increased warmth, edema and/or erythema of affected extremity
- Unexplained shortness of breath
- Chest pain
- Coughing
- Hemoptysis
- Feelings of anxiety or dread

Clinical Interventions:

- Stat order for PT/INR
- Stat chest X-ray
- Transfer to hospital

Probing Questions:

- Is there evidence the facility routinely monitors lab results of all residents on anticoagulant/antiplatelet therapy?
- Is there a system to ensure lab results, including PT/INR, are appropriately communicated to the physician, including when sub-therapeutic values are obtained?
- Is there evidence that the facility educates caregivers on risk factors, symptoms, and signs that may indicate thromboembolism?

Source:

1. Adverse Drug Event Trigger Tool:

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/Adverse-Drug-Event-Trigger-Tool.pdf>