

We would like your I.N.R. to be at or just below 2 for your procedure.

Please be sure to bring your yellow book to the procedure, as we will check your I.N.R. again on the day of surgery.

If your I.N.R. result is above 2 on the day of your procedure, we may choose to postpone your procedure for your own safety.

You will be advised when to recommence your medication before you go home after your procedure. It is likely to be the evening of your procedure, but may be the following day.

Should you have any concerns, or wish to discuss either your medication or procedure, please contact us.

Contacts

ENT secretaries: 01270 612002/612297

Specialist Nurse: 01270 273621
(answerphone)



Mid Cheshire Hospitals
NHS Foundation Trust

Warfarin

Information for patients awaiting minor surgery with the Ear, Nose and Throat (ENT) department regarding your anti-coagulation therapy



This information is available in audio, Braille, large print and other languages.
To request a copy, please telephone 01270 273621.



Medicines which thin the blood help to prevent blood clots from forming within your blood vessels, heart and brain, and are prescribed to protect you from this. However, they could also increase your risk of bleeding during and following your planned procedure, which can increase the risk of complications with healing.

We have identified from your records that you are prescribed WARFARIN (or a variation of it) in order to maintain your health status. If this is correct, this leaflet applies to you.

This leaflet is not applicable to you if you have (within the last two years);

- Had a cardio-vascular problem (such as heart attack, blood clot or stroke)
- Had a cardio-vascular procedure (such as the insertion of a stent into a blood vessel, or an operation on your heart)

OR you have been advised NEVER to stop your medication

OR you take more than one medicine which thins your blood

If ANY of these apply to you, please contact us for further advice, and disregard this leaflet.

If you are unsure about your medication or if this leaflet applies to you, please either contact us, or take this leaflet to your G.P. surgery for further advice.

If you take WARFARIN (or a variation of it such as acenocoumarol, sinthrome or phenindione) you will have been provided with an anti-coagulation booklet, and have regular blood tests to check your I.N.R. It is likely that your target I.N.R. is 2.5.

Please liaise with your anti-coagulation clinic as you will need to have an I.N.R. check approximately **one week** before your procedure to allow time to adjust your dose. Please take this leaflet to that appointment.

