

## INTRODUCTION

Warfarin is an anticoagulant that requires regular blood (INR) monitoring for appropriate dose decisions. There are approximately 7000 patients currently under the OUH warfarin service and we perform approximately 100,000 INR samples for warfarin dosing each year. Patients need an INR test every 3 weeks on average.

Patients obtain a blood test via their GP, which is sent to the OUH laboratories. Specialist warfarin nurses 'dose' the patients warfarin and advise on date for next INR test dependent on the INR results. This information is communicated to patients by first class post and so patients receive dosing results approximately 2 days after blood tests.

The service is considering introduction of electronic communication of dosing instructions to patient instead of letters in order to allow secure and quicker communication with patients (e.g. app/patient portal/text).

## AIMS

- To identify patient experience with the current postal system of INR results and warfarin dosing
- To assess the demand and feasibility for an electronic INR/dosing communication system

## METHODS

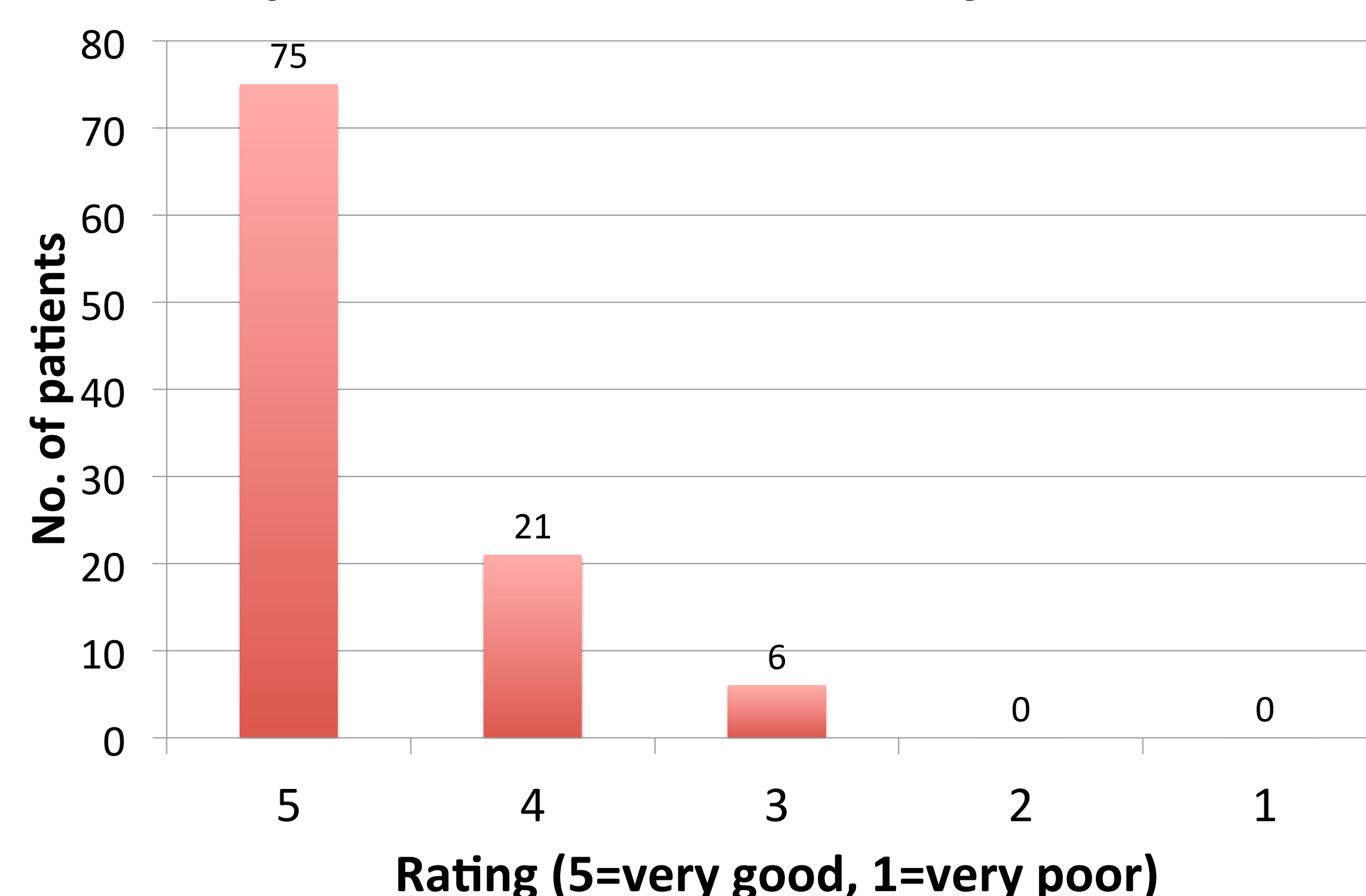
- We performed a service evaluation on patients known to the OUH anticoagulation service between 1<sup>st</sup> March 2018-1<sup>st</sup> June 2018
- A patient questionnaire was developed
- Anticoagulation nurses who regularly have telephone contact with patients about their dosing collected survey results by telephone
- Results recorded on electronic database for analysis

## RESULTS

Across the study period, the department collected results from 102 patients. The average age was 66.9 years old (note, age not recorded for every patient)

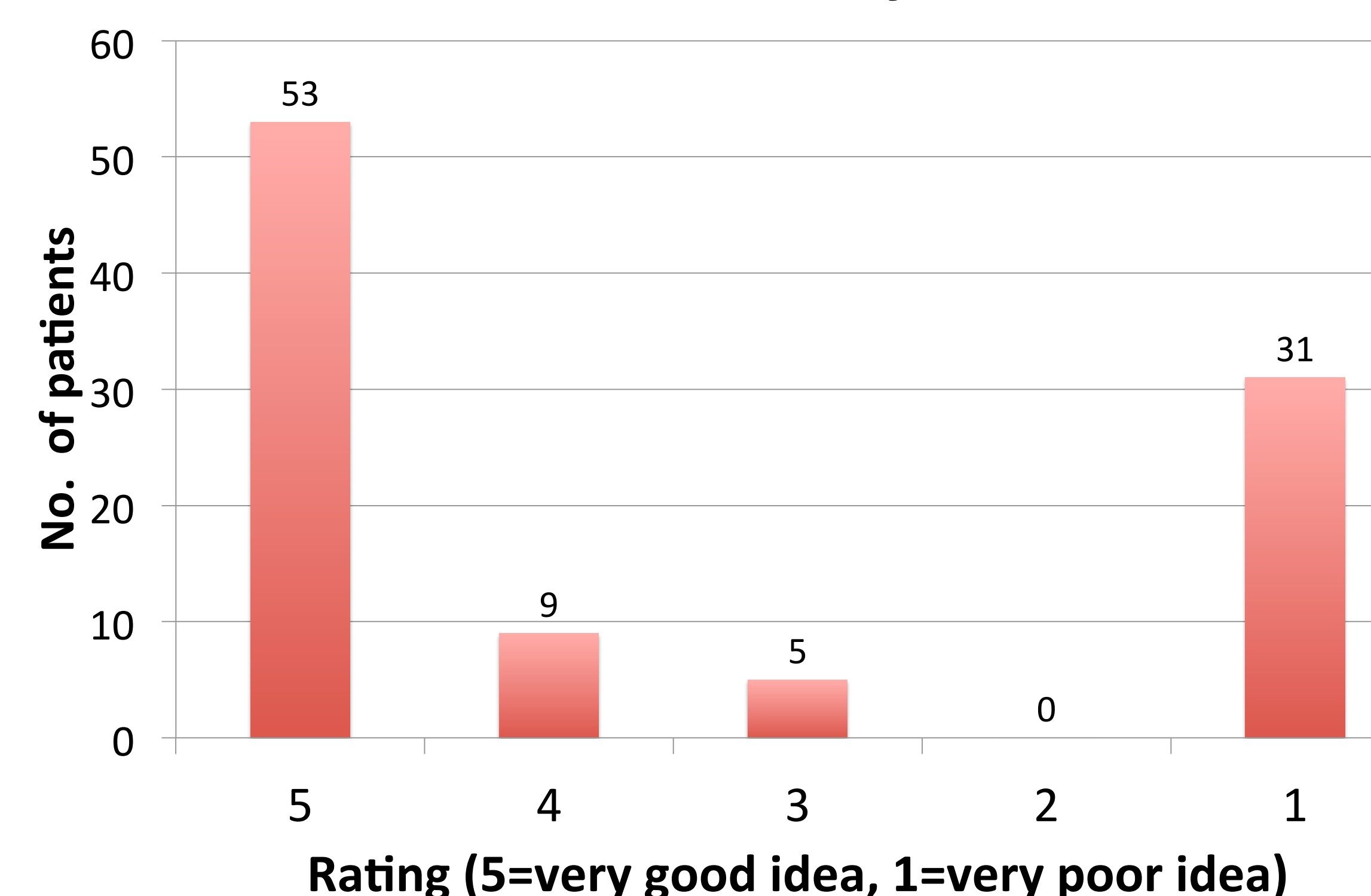
### OVERALL RATINGS

**Rating of current anticoagulation postal communication system**



- 75/102 (**75.3%**) patients rated the current service as 5/5 (**very good**)
- Qualitative feedback showed patients were **happy with current service**

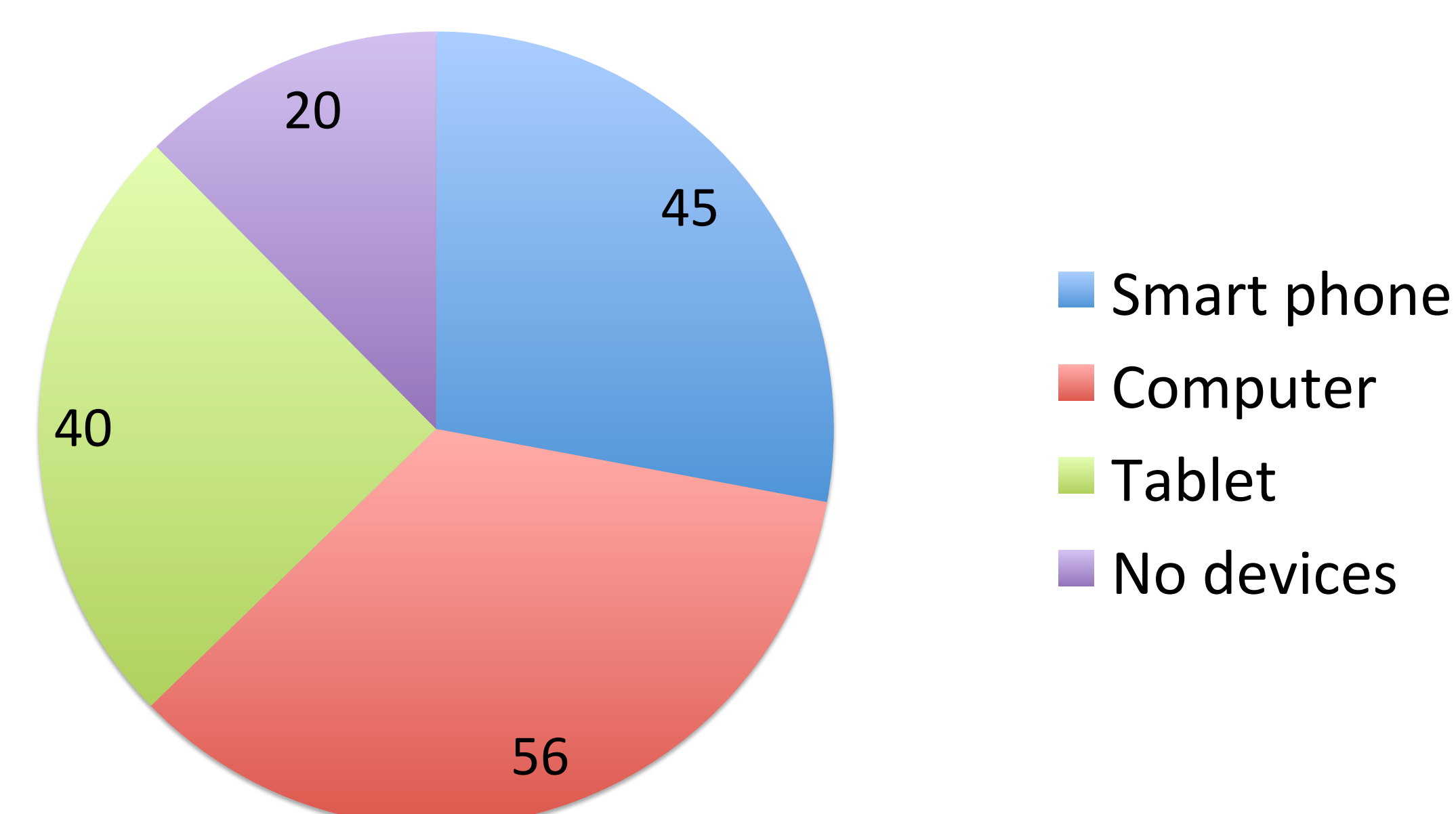
**Rating for a potential electronic INR communication system**



- 53/102 (**51.9%**) patients rated the idea of a potential electronic communication system as 5/5 (very good idea) and commented that **email or text** would be beneficial
- 31/102 (30.4%)** patients **were against an electronic alternative**

### ELECTRONIC DEVICES

**Number of electronic devices owned by our study population**



- 80/102 patients in our study owned an electronic device- the most common being a **computer**
- 20/102 patients **did not have any access to internet/electronic devices**

## DISCUSSION

- The findings from our study demonstrate that the majority of our patients are happy with the current service.
- There may be potential for an electronic communication system for some patients, but not all.
- A significant cohort of our patients are elderly and may not have regular access to electronic devices/internet
- It is not yet known whether the patient portal will 'release' results to patients quickly enough to be used for warfarin dosing advice. Preliminary meetings with regard to considering a separate electronic system have highlighted that this would be expensive to introduce and maintain.
- Currently the 'dosing information' is integrated into the next INR request card for the patient to take to the GP. An electronic system would need to incorporate this feature as well.

## OUTCOME OF QIP

- Based on the results of this QIP, the OHTC team are re-considering whether it is sensible to introduce electronic communication. It would need to be introduced as an option alongside paper communication.
- The most sensible option would be to use the patient portal if it's design allows fast enough communication of INR results and warfarin dosing.

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