

4. Anticoagulation

Anticoagulation				
Task / Activity	Self-Assessment / Date	Competency Assessed Y / N	Competency Achieved	Signed off by Clinical Assessor / Date
<p>Knowledge and Understanding</p> <ul style="list-style-type: none"> • Demonstrate an understanding of the clinical indications for anticoagulation. • Demonstrate an understanding of the pathophysiology of atrial fibrillation and atrial flutter. • Demonstrate an understanding of the physiology of the coagulation cascades. • Demonstrate an understanding of the likelihood of frailty and complexity of anticoagulated patients' medical conditions. • Demonstrate an understanding of the rationale for different INR targets in warfarin-treated patients. • Demonstrate an understanding of the reasons for non-compliance, and how to discuss this with patients. • Demonstrate an understanding of consent and history taking in the initiation of anticoagulant therapy. • Demonstrate an understanding of monitoring and lost-to-follow-up procedures. • Demonstrate an understanding of call/recall mechanisms for warfarin-treated patients. Demonstrate an understanding of local policies and protocols as well as contracts. • Demonstrate an understanding of pre-conception and pregnancy planning. • Demonstrate an understanding of how to undertake a pregnancy risk assessment. • Demonstrate an understanding of which grades of staff can override computerised decision support software recommendations. • Be aware of the local mandatory training requirements for those involved in anticoagulation therapies, particularly warfarin. • Demonstrate an understanding of the 'annual review' for warfarin-treated patients. • Demonstrate an understanding of the pharmacological choices available. • Demonstrate an understanding of the management of anticoagulant side effects and complications. • Demonstrate an understanding of interactions between anticoagulant agents and other medicines. • Demonstrate an understanding of the additional courses of study necessary to utilise computerised decision support software. • Demonstrate an understanding of how to use the point of care testing hardware. • Demonstrate an understanding of how to acquire consumables necessary for point of care testing. • Demonstrate an understanding of equipment calibration, for internal and external quality control, and when this should be performed. • Demonstrate an understanding of storage of consumables particularly calibration fluids and testing strips. <p>Review of treatment</p>				

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<p>Be aware of CQC KLoE³</p> <ul style="list-style-type: none"> • Be able to elicit patients understanding and have a conversation about indications for anticoagulant therapy, risks of non-compliance, potential side effects, and monitoring. • Be able to reinforce clear instructions on how to take chosen medicine. • Be able to provide patient with clear safety netting advice relating to side effects and red flags and action to be taken. • Be able to provide patient with clear safety netting advice relating to missed doses of anticoagulant medicine and what action to take. • Be able to signpost patient to a senior clinician where risks are identified. • Be able to teach patient self-injection techniques for injectable anticoagulants where prescribed e.g. for 'bridging'. • Be able to set up appropriate follow-up appointments. • Demonstrate ability to operate Point of Care Testing (e.g. CoaguChek). • Be able to complete the Patient Held Records (Yellow Book) and communicate effectively with the patient. • Where patients are monitoring their own INR at home, know how this is managed to ensure safe prescribing and monitoring. • How to ensure that communications from secondary care are understood by the patient: <ul style="list-style-type: none"> ○ Prior to surgery. ○ Prior to invasive investigations. <p>On Review</p> <ul style="list-style-type: none"> • Be able to reiterate side effects and red flags. • Be able to reiterate missed dose advice and action to be taken. • Be able to recognise when patients need exceeds competence and refer on as appropriate. • Be able to set up a clinic room prior to an International Normalisation Ratio (INR) clinic starting, with all the equipment cleaned and prepared. • Be able to assess the patient regarding bleeding or thrombotic events, tablet compliance and changes in medication, and lifestyle changes e.g. alcohol binges. • Be able to check that routine monitoring blood testing requirements have been fulfilled at the required intervals for Direct Oral Anticoagulant (DOACs). • Be able to provide holistic health promotion advice that supports improving cardiovascular health. • Be able to address any issues around frailty/frailty syndrome that may impact on the safety of anticoagulant use.⁴ 				

³ <https://www.cqc.org.uk/guidance-providers/gps/gp-mythbusters/gp-mythbuster-92-anticoagulant-monitoring-primary-care>

⁴ <https://www.england.nhs.uk/ourwork/clinical-policy/older-people/frailty/frailty-resources/>