

## Applied Drug Therapy Homework #6

CA is a 72 year old female with a 10 year history of ischemic cardiomyopathy and is well known to you and your collaborating physician. She presents to your office with a 2 day history of near-syncopal episodes. She states that, twice in the past two days, she became lightheaded and felt her heart racing.

PMH – positive for ischemic cardiomyopathy x 10 years

Meds – Lisinopril 10 mg/day, spironolactone 25 mg qd, furosemide 40 mg prn edema.

On physical exam, her pulse is 132 and irregularly irregular. An ECG done in the office shows atrial fibrillation (new since her last ECG about 6 months ago).

Your collaborating physician is temporarily unavailable (She's off delivering a baby). You know that the cardiologist will probably want to hospitalize CA and initiate anticoagulant therapy. In order to expedite the process, you spend a few more minutes obtaining a more detailed history from Ms. A and reviewing her chart before dialing the phone.

1. What information do you need to share with the cardiologist to help decide if this patient is a good candidate for warfarin therapy? List 3. (2 points each – 6 points total points)

Three months later, Ms. A returns to your clinic for monitoring and medication refills. She has been stable and compliant on warfarin 5 mg. daily with her INRs consistently between 2-3 over the past three months. She had laboratory work drawn yesterday in preparation for the appointment today. Your assistant hands you the lab report just as you are ready to walk into the exam room. The INR is 5.2.

2. What is your primary suspicion as to why today's INR is not in line with previous INRs? (4 points)

3. Using this prescription blank, write a prescription for warfarin therapy. (10 points)

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| <b>Name</b> Any Name   |  | <b>Date</b> 10/16/03                                       |  |
| <b>Address</b> Any Address   |  |  |  |
| <b>City/State/Zip</b>  |  | <b>Age/Wt</b> 72 /   |  |
| <p><b>Rx</b></p> <p><b>Warfarin (see dose below)</b><br/> <b>Disp: #30</b><br/> <b>Sig: One tablet daily for stroke prevention</b></p> |  |  |  |
| Dispense as<br>Written   |  | Substitution Permitted                                     |  |
| Refills  |  | DEA #  |  |

3. Perhaps CA is non-compliant (Who isn't, these days?). What patient education do you want to re-enforce with Mrs. A. regarding warfarin therapy? (BE BRIEF AND CONCISE, AND KEEP IT SIMPLE!!!) (5 points --- but points will be deducted if you write a thesis! (If you are typing your answers, you should be especially brief! Try to think about how much time you're going to be able to spend on this "problem" in the clinic---Hint---BE BRIEF!!!)