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TIME IN THERAPEUTIC RANGE AND COST-EFFECTIVENESS OF ANTICOAGULATION WITH INRATIO DEVICE (B1), Quinn Nguyen. Kaiser Permanente Medical Care Program, San Francisco, CA (quinn.p.nguyen@kp.org) IRB approved.

Patients receiving anticoagulation care within Kaiser Permanente Northern California (KP NC) can obtain their INRs through traditional laboratory venipuncture or more recently, Patient Self-Testing (PST) devices. Few studies exist to compare the time-in-therapeutic range (TTR) of INRs between these two models of testing within pharmacist driven anticoagulation clinics. This study compared the TTR between laboratory venipuncture and PST within KP NC pharmacy ambulatory clinics and further evaluated the cost-effectiveness to both patients and the San Francisco Medical Center. Only patients with an indication of indefinite anticoagulation were included in both the TTR and cost analysis. A retrospective chart review was conducted to determine the TTR over the period between September 2007 to April 2009. The cost difference to patients was obtained via phone surveys accessing cost of travel and time expenditure. The cost-difference to the provider was calculated using written survey responses of anticoagulation pharmacists, cost of laboratory expenses to perform INRs and analysis of operations in an anticoagulation clinic. Secondary outcomes included drop-out rate with PST, incidences of hemorrhagic or thromboembolic events, and correlation between PST and traditional laboratory venipuncture. The results and conclusions will be discussed.