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INPATIENT WARFARIN MUE: IMPLEMENTATION OF WARFARIN THERAPY MANAGEMENT GUIDELINE (WTMG) AND BEST PRACTICES (B4), Dimay Wang, Doug Humber. UCSD Medical Center, San Diego, CA (d5wang@ucsd.edu) IRB approval pending

Supratherapeutic INRs result in overall patient morbidity. Currently UCSD has no standard practice guideline for the management of warfarin therapy. In light of TJC's new addition to NPSG 3.01.05, warfarin safety is a high priority. The primary objective is to determine the incidence of INRs  $\geq 4$  before and after the implementation of the WTMG. A secondary objective of the study is to characterize the warfarin usage and management of elevated INRs at UCSD, and to validate the safety of the WTMG. This is a retrospective cohort study of patients treated before and after implementation of the WTMG. Inpatients at UCSD with a LOS >24 hours and on warfarin therapy will be consecutively identified starting from 2/2008 until a total of 158 patients are identified. Chart review will be conducted on these patients. After the implementation of the WTMG, consecutive chart review will again be conducted starting from 2/2009 until 158 patients are identified for comparison. These cohorts will be compared based on the primary outcome indicator, incidence of INR  $\geq 4$ . Baseline characteristics will be compared using parametric, nonparametric or categorical data analysis depending on the distribution of the data. The the primary outcome measure will be compared using multiple logistic regression. Descriptive and inferential statistical analyses will be performed using SAS version

9.1.3. The significance level will be set a priori at 0.05 without adjustment for multiple comparisons. Results and conclusions will be presented.