

## **Anticoagulation Department**

### **TELEMEDICINE PLAN FOR ALL FOLLOW-UP APPOINTMENTS FOR ANTICOAGULATION PATIENTS DUE TO THE COVID-19 PANDEMIC**

1. All **new** patients will continue to be seen in clinic unless / until advice is received that they should no longer attend. We have asked GP's to commence Direct Oral Anticoagulants and provided prescribing guidance for primary care. We can isolate when we see new patients, as long as referral rates remain current.
2. Friday 20<sup>th</sup> March - Lead CNS reviewing weeks' ahead clinics and re-scheduling appointments for those patients deemed at risk. The Lead CNS will look through the same to identify any patients who they feel **should** attend their appointment.
3. The Anticoagulation Team will offer virtual appointments via telephone consultations to those patients on DOACs to avoid hospital visits - except for those patients already identified by the Lead CNS who they feel would benefit from face-to-face consultations. Due to the volume of this activity, this will be dedicated to several nurses.
4. Patients will be encouraged to avoid presenting to the Emergency Department for minor bleeding issues that can be addressed at home or with phone support from the clinic. These include minor cuts, bruises, and nosebleeds.
5. Stable patients will be offered extended INR testing up to an interval of 12 weeks. This cannot be routinely recommended for unstable patients or out of range INR test. The Team will assess the risk / benefit needed in patients with out of range INRs in order to individualise this approach and communicate clinical decisions to the patient.

6. If patients prescribed long-term anticoagulation develop COVID-19, as with any acute illness, the INR may be effected. This is especially true if there is diminished dietary intake and / or diarrhoea.
7. Domiciliary visits to housebound and vulnerable patients will continue and the team will contact patients beforehand to ensure that they have no symptoms. All nursing homes are sending venous INR samples direct to the lab on the dates agreed with the clinic for follow up. PPE will be available to all staff on these visits.
8. The CNS will assess whether established warfarin patients with NVAf or VTE might be good DOAC candidates and, if so, consider switching during hospital admission to look at which patients could convert to a DOAC safely as an outpatient or home visit and explain the clinical choices to the patients.
9. Self-testing represents a great option to promote the continuation of INR testing in patients who are practicing social distancing. This will continue to be supported by the team and will not change. There may be more patients willing to self-test due to prolonged period of social distancing.
10. "Work from home" approach is not possible, the Anticoagulation Clinic Team will work closely with their management and infection control teams to identify strategies to minimise any exposure risk to patients and staff.
11. Please note that this is a rapidly developing area. These measures are to help protect patients and staff.

## Website information

As part of the anticoagulation clinics response to the COVID-19 (coronavirus) outbreak, we are putting measures in place to protect patients, visitors and staff. In order to reduce hospital visits, we are making some changes to out-patient appointments.

If your appointment is on or after Monday 23<sup>rd</sup> March, you will be contacted by the anticoagulation team, phone or letter if there are any changes to your appointment.

Changes will include switching appointments to a virtual appointment where possible (either by telephone or video), or where clinical teams feel it is safe to do so, rearranging or cancelling appointments.

If your appointment is changed to a telephone appointment, please note the number may appear as a private or unknown caller. Please do pick up.

If you do not hear from us, please visit the hospital as planned for your appointment.

If you, or someone living in the same house as you, develops either of the following symptoms:

- a new, continuous cough
- a high temperature (38°C or higher)

Please stay indoors and keep away from others. Please do not come in for your hospital appointment.