

ANSWERS: Practice Quiz 4 Part D

Coagulation Modifiers

May, 2014

DEH 2300

1. What is the antidote for Coumadin® (warfarin)? Heparin? Lovenox® (enoxaparin)?

**ANSWERS: Vitamin K for Coumadin® (warfarin)
Protamine Sulfate for Heparin and Lovenox® (enoxaparin)**

2. Which lab test(s) should be monitored for Coumadin® (warfarin)? Heparin? Lovenox® (enoxaparin)?

**ANSWERS: INR for Coumadin® (warfarin)
aPTT for Heparin
See Drug Handbook by Wynn, page 479 and <http://www.rxlist.com> for Lovenox® (enoxaparin).**

3. What route(s) is/are used to administer Coumadin®? Heparin? Lovenox®?

**ANSWERS: Coumadin® (warfarin) = PO (oral)
Heparin = SC (subcutaneous) and IV (intravenous)
Lovenox® (enoxaparin) = SC (subcutaneous)**

4. How long does it take Coumadin® (warfarin) to reach therapeutic levels?

ANSWER: 3 to 5 days

5. Which anticoagulant has the most drug interactions?

ANSWER: Coumadin® (warfarin)

6. What conditions would contraindicate the administration of Coumadin®? Heparin? Lovenox®?

ANSWER: See Student Version of Coagulation Modifiers PowerPoint, Handbook by Wynn and text by Woodrow.

7. What are major indications for Coumadin®? Heparin? Lovenox®?

ANSWER: See Student Version of Coagulation Modifiers PowerPoint, Handbook by Wynn and text by Woodrow.

8. What assessments are important for a patient receiving Coumadin®? Heparin? Lovenox®?

ANSWER: See Student Version of Coagulation Modifiers PowerPoint, Handbook by Wynn and text by Woodrow.

9. What patient teaching is important for Coumadin®? Heparin? Lovenox®?

ANSWER: See Student Version of Coagulation Modifiers PowerPoint, Handbook by Wynn and text by Woodrow.

10. What foods are particularly high in vitamin K? This information would be pertinent when teaching a patient taking which anticoagulant?

**ANSWER: See your nutrition book and/or
<http://www.vaughns-1-pagers.com/food/vitamin-k-foods.htm>**

11. What effect would ASA (aspirin) most likely have on a patient taking Coumadin®? Heparin? Lovenox®?

ANSWER: Elevate lab tests and increase the likelihood of bleeding

12. When (time of time) is Coumadin® usually administered?

ANSWER: The most important thing is to take it the same time everyday. Ideally it is taken in the evening.

ANSWERS for Question 13 - 17: See Student Version of Coagulation Modifiers PowerPoint, text by Woodrow and Drug Handbook by Wynn.

13. Why is it important for a patient taking an anticoagulant to wear a Medic-Alert bracelet or necklace?

14. What does the term “thrombocytopenia” mean?

ANSWER: Any disorder in which there is an abnormally low amount of platelets.

15. Why is it important for you, as a dental hygienist, to be aware that your patient is taking Coumadin®?

16. Why is it important for a patient taking Coumadin® to read OTC med labels?

17. What drugs can be administered to patients who develop HIT (heparin-induced-thrombocytopenia)?

18. What is the classification of Eliquis® (apixaban) and what factor would exclude a patient who needs a drug in this class from taking this particular drug? When was Eliquis® (apixaban) approved by the FDA?

ANSWER: See website below.
www.eliquis.com

19. What is the classification of Pradaxa® (dabigatran etexilate mesylate). What is the primary indication? What is the highly advertised advantage to those using this drug? Which patients in need of a drug in this class cannot use this particular drug?

ANSWER: See website below.
<http://www.pradaxapro.com>