

A syringe is provided to measure your dose. Draw up the solution from the ampoule into the syringe by inserting it into the ampoule and resting it on the bottom of the ampoule.

Pull the plunger slowly up to draw the medicine into the dispenser. The clinic will advise you which line on the dispenser to use. Either the 1mg line or 2mg line.

Carefully squirt the syringe liquid into some water or orange juice. Mix well before drinking.

Ensure that any glass waste is disposed of carefully.

Contact

If you have any questions or wish to discuss anything further please telephone the anticoagulant clinic:

- Kings Mill Hospital**
 01623 622515, extension 3601
 (answerphone Monday to Friday from 9am-5pm).
- Newark Hospital**
 01636 685807
 (Warfarin Helpline – Monday to Friday from 9am-5pm).

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net. This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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INFORMATION FOR PATIENTS

Haematology services

Vitamin K

Everything you need to know
about why you need to have
vitamin K

This leaflet aims to answer common questions about your high INR and the use of vitamin K.

What is vitamin K?

Vitamin K is also known as phytomenadione and is needed by the body to make clotting factors, which help the blood to clot. Vitamin K can be used as an antidote to reverse the effects of warfarin.

Why have I been prescribed vitamin K?

You have been prescribed a dose of vitamin K because your INR is too high. This means that your blood clotting is too slow and will not clot quickly enough, which puts you at risk of bleeding. A single dose of vitamin K is given by mouth to reverse the action of warfarin. This helps to prevent a hospital admission if you have no bleeding problems.

Why is my INR high?

Your INR may have become high for a number of reasons, which we will have already discussed with you. Some drugs, especially antibiotics, can enhance the effect of warfarin, therefore it is important to let us know of any changes to your medication, including short courses of medication. In other cases, if you are unwell or have diarrhoea this can also affect the INR.

Certain things that you drink or eat such as cranberry or grapefruit juice and excess alcohol may also enhance the effect of warfarin.

Is there anything else I need to do?

After taking vitamin K your INR will be reduced within 12 to 24 hours.

The risk of bleeding after this will be reduced but you will still need to watch out for signs of bleeding. These include:

- Nose bleeds
- Excessive bruising
- Bleeding gums
- Black stools
- Vomiting blood
- Blood in your urine.

If you notice anything which you are worried about you **must** contact your GP or the anticoagulant clinic for advice.

If you have an urgent problem out of hours, for instance excessive bruising, bleeding, severe headaches which make you feel sick, **it is very important you seek urgent assistance**. You can contact NHS 111 or visit your nearest Emergency Department. Please make sure you have your warfarin information and last dosing instructions with you.

You **must not take any more warfarin** until your INR has been taken again; this will be within one or two days.

The anticoagulant clinic will contact you with further instructions. Your warfarin will probably be restarted at a lower dose and you may need more frequent blood tests for a couple of weeks.

Are there any side effects of vitamin k?

Giving vitamin K by mouth is safer than giving the drug by injection and is just as effective. There is a slight risk of an allergic reaction with any medication, please seek **URGENT** assistance if you notice swelling of your lips or eyes, shortness of breath or nasal congestion, itching or a rash.

Injected vitamin K rarely causes severe allergic reactions but may be required if the drug cannot be taken by mouth.

How is it given?

In some cases a specialist nurse from the warfarin clinic will administer the vitamin K. Alternatively, the vitamin K, along with verbal and written instructions, will be sent to you.

Instructions how to administer vitamin K

Ensure the liquid is in the main body of the ampoule.

Hold the body of the ampoule between the thumb and first finger of one hand, with the blue spot towards the thumb.

Hold the top of the ampoule between the thumb and first finger of the opposite hand and exert pressure **away** from the side with the spot to produce a clean break.

Wrapping a tissue around the neck of the ampoule can reduce the risk of harm if the glass breaks unevenly.