

A PATIENT PREFERENCE AND ADHERENCE SURVEY IN THE UAMS  
ANTICOAGULATION CLINIC. Name or Names Go Here, UAMS, 4301 West  
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Many disease states today require short or long term anticoagulation with warfarin. Warfarin should be monitored every four to six weeks to ensure anticoagulation is maintained in the therapeutic range. In the past, patients have been required to have blood drawn through a venipuncture to determine their anticoagulation level. Technological advances have developed monitors which require only a small amount of blood from a fingerstick to determine anticoagulation in a patient, which is known as point-of-care testing. These monitors offer many advantages including results in a few minutes and a single fingerstick to obtain a sample of blood. Furthermore, these monitors facilitate the ability of institutions to organize coumadin clinics and provide more effective monitoring of anticoagulation.

The purpose of this study is to determine patient preference between traditional lab draws via venipuncture, conducted by a phlebotomist, and point-of-care testing via the Coagucheck-S monitor, conducted by a clinical pharmacist. A secondary purpose is to assess patient satisfaction with the services provided through an anticoagulation clinic. A final purpose of the study is to assess patient appointment adherence factors.

These objectives will be assessed through a questionnaire completed by patients in a pharmacist-managed anticoagulation clinic. Descriptive statistics will be calculated and chi-square analysis will be conducted to compare groups.

The results of the study will be used to implement changes in the UAMS Anticoagulation Clinic to improve patient care and patient satisfaction in the clinic.