

Percentage of Patients Prescribed Anticoagulants in an Emergency Department Setting Who Picked Up Prescriptions

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BACKGROUND

- Rivaroxaban, Apixaban (DOACS), Enoxaparin and Warfarin are anticoagulants are regularly prescribed in the Emergency Department (ED).
- Common indications: atrial fibrillation (AF), deep vein thrombosis (DVT), venous thromboembolism (VTE) and pulmonary embolism (PE) ⁽¹⁾.
- Goal of anticoagulants prevention of recurrent and extensions of thrombotic events and reduce post-thrombotic syndrome ^(2,3).
- Patients who do not pick up their anticoagulant prescriptions following ED visits are more likely to revisit the ED within 30 days than those who fill their prescriptions.
- Our goal: assess the proportion of patients prescribed anticoagulants and filled their prescriptions within 4 weeks.

RESULTS

- 225 eligible patient charts reviewed (Fig 2).
- 14.2%** of patients did not pick up their prescriptions (Fig 3).
- Descriptive Statistics indicated no correlation between ESL or insurance due to low power.
- Logistic regression showed no statistical significance between Weight, Age, Gender or Zip code (Table 1. Table 2.).

DISCUSSION & CONCLUSION

85.7% of patients newly prescribed anticoagulants in the University of Utah Emergency Department filled their prescriptions between January 2021 and December 2022.

Limitations of this study include the inability to gather data from outside pharmacies, lack of height data within patient charts and limited access to charts outside of the University of Utah.

Strengths include data from two consecutive years and multiple variables assessed.

Prescription fill rate of anticoagulants prescribed at the University of Utah Pharmacy within the University of Utah Emergency Department was unaffected by any studied variables. The absence of statistically significant data may highlight a lack of bias when treating patients, easily accessible resources, and a lack of a need for intervention within the University of Utah Emergency Department; a repeat of our study that addresses our limitations would be ideal.

METHODS

- Electronic medical records (EMR) from patients prescribed anticoagulants by the ED between 2021 and 2022 were obtained.
- EMR charts were manually reviewed and coded to assess our research question and sub-analysis (Fig. 1).
- Percentage of patients who did not pick up anticoagulant prescriptions were assessed.
- Descriptive and regression analysis (R studio) were performed for variables that may influence outcomes. Both analyses assess the final number of patients who met our criteria (n= 225).
- Patients were sorted into two categories: "picked up" or "did not pick up."
- Variables assessed included:
 - Location (Rural vs. Urban zip codes)
 - Insurance Coverage (Y/N)
 - Gender
 - ESL
 - BMI (>40 kg/m²)
 - Weight (>120 kg)

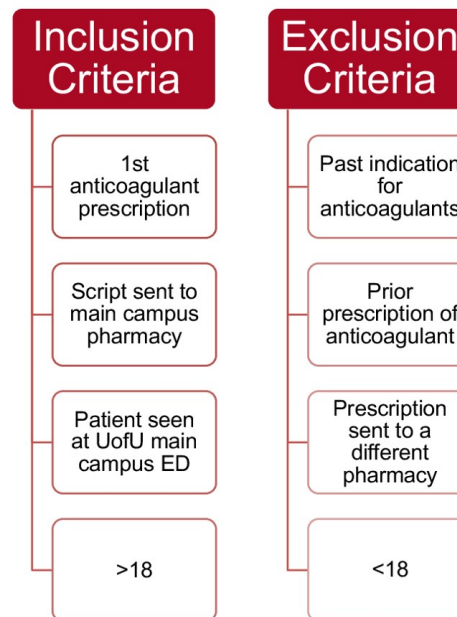
Table 1

Variables	P-value
Weight	0.597
Age	0.529
Gender	0.488
Rural Zip code	0.193
Urban Zip code	0.26

Table 2

Variables	P-value
Weight <60	0.8098
Weight 60-69	0.4132
Weight 80-89	0.7679
Weight 90-99	0.4397
Weight 110-119	0.9048
Weight >120	0.2002
Age <40	0.398
Age 50-59	0.3967
Age 60-69	0.3612
Age > 70	0.9271
Gender	0.2126
Rural Zip code	0.2775
Urban Zip code	0.3021

Fig 1

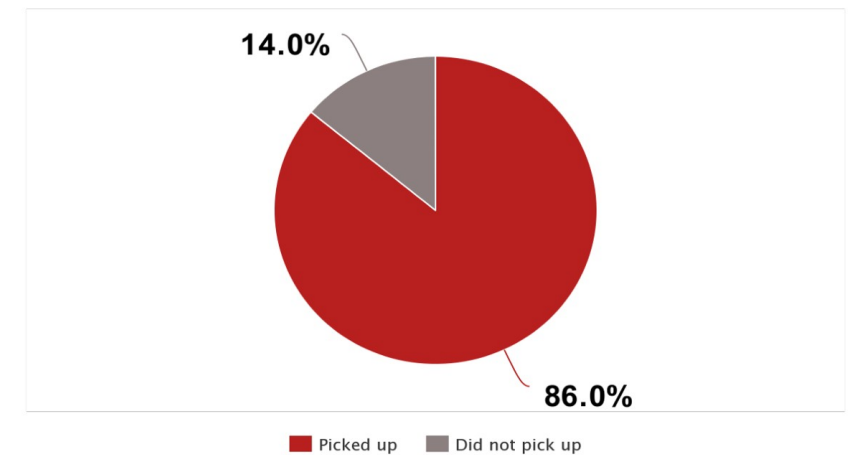


Patients who picked up prescriptions
193 (85.7%)

Patients who **did not** picked up prescriptions
32 (14.2%)

Fig. 2

Patients who picked up vs did not pick up prescription



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