DAILY INR RECORD

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| NAME |  | INR RANGE |  | TO |  |

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| WARFARIN DOSAGE (mg) | | | | | | | |
| Combination Dose e.g. 5/5/6 or 3/4/4/3/4/4 | | | | | | | |
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| Date | Day | Dose  mg | Taken  | Notes  E.G. INR RESULTS, BLOODS TAKEN, APPOINTMENTS, SYMPTOMS |
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