



**MEMORANDUM**

**To:** Emergency Departments, EMS, Healthcare Facilities, and Local Health Departments

**From:** Illinois Department of Public Health

**Date:** March 23, 2018

**Re:** Undifferentiated Vitamin K Dependent Coagulopathy

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Since March 10, 2018, four cases of severe bleeding due to a Vitamin K-dependent coagulopathy have been reported to the Illinois Poison Center. The patients did not have a history of taking warfarin or exposure to brodifacoum-containing rat poisons, yet had INR values ranging from 6 to greater than 20 on presentation.<sup>1</sup>

All of the cases had prolonged hospitalization due to elevated INR values despite fresh frozen plasma (FFP) and intravenous vitamin K. The length of time and clinical treatment necessary to control the coagulopathy suggests a long-acting vitamin K antagonist, or “superwarfarin,” as the cause of the clinically significant bleeding exhibited by these patients.

An investigation of this outbreak is currently ongoing. Should your institution encounter a patient with significant bleeding and an elevated INR without a definitive etiology (*e.g.*, taking warfarin or overdose of rat poison), please promptly report the case to your local health department or the Illinois Department of Health at 217-782-2016. Further, we ask that any similar cases encountered since February 1, 2018, also be reported to your LHD.

If your institution would like to discuss treatment and management guidance for these complicated patients, please call the Illinois Poison Center at 1-800-222-1222.

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<sup>1</sup> INR, or International Normalized Ratio, is a standardized measure of blood coagulation. The higher an INR, the less coagulable a patient’s blood is and the higher the corresponding risk of bleeding becomes.