

Blood Thinner FAQ

Blood thinners are medications that help prevent or treat blood clots. Take your blood thinner as prescribed. How long you take a blood thinner depends on your medical condition and should be discussed with your provider. If you are pregnant, planning pregnancy, or think you may be pregnant, contact your provider right away. Some blood thinners are not safe during pregnancy.



1. Does my blood thinner get rid of a clot?

No. A blood thinner does not break up or remove a clot. Your body works to clear the clot on its own. The medicine helps stop new clots from forming and keeps existing clots from getting bigger.

2. What should I do if I get a cut or bruise?

Blood thinners can make you bleed or bruise more easily. For a small cut or bruise, put firm pressure on the area for 5 to 10 minutes. You can also use ice for bruising. If bleeding is heavy, does not stop, or worries you, call your provider or go to an emergency room.

3. Do I need to avoid certain foods or drinks?

It is safest to avoid or greatly limit alcohol while taking a blood thinner. If you take **warfarin**, try to eat about the **same amount of vitamin K foods each week**. These foods include spinach, kale, broccoli, Brussels sprouts, and collard greens.

4. What if I need surgery or a procedure?

Tell your healthcare team before any surgery, dental work, or procedure. They will plan your blood thinner dosing before and after the procedure.

5. What pain medicine can I take?

Tylenol is usually the preferred over-the-counter pain medicine for people taking blood thinners. Avoid non-steroidal anti-inflammatory pain medicines (e.g., ibuprofen, Advil®, Motrin®, Aleve®, naproxen) that can increase your risk of bleeding.

Seek urgent medical attention if you have:

- Bleeding that does not stop
- Unusual bruising
- A fall or head injury
- Blood in your urine or stool

Becoming a patient: To join the NYU Anticoagulation Service, your provider will need to fax a completed referral form to **929-455-9066**.