Introduction
Atrial fibrillation is the most common cardiac arrhythmia. Although not immediately life-threatening, it causes a five-fold increase in stroke, three-fold increase in heart failure and two-fold increase in death. Oral anticoagulation by Warfarin reduces the risk of stroke by two-third and mortality by one-quarter compared with control. Non-vitamin K antagonist oral anticoagulants (NOACs), such as Apixaban, Dabigatran and Rivaroxaban, are suitable alternatives to Warfarin and their use is increasing rapidly. However, due to heavy workload in public hospitals, many geriatric patients did not receive adequate drug education and empowerment during their hospital stay. Hence, after discharge, they are in lack of important anticoagulant knowledge, such as adverse drug events management, drug-drug/drug-food interaction, miss-dose management, etc.

Objectives
1. To provide anticoagulant education to geriatric patients
2. To provide post-discharge support to help patients handle anticoagulants in real-life environment
3. To measure the anticoagulant knowledge before and after receiving this service
4. To measure patient satisfaction after receiving the service

Methodology
Specialty nurses in Stroke, Cardiology and Gerontology were responsible for screening patients in wards. Patients who were newly prescribed with oral anticoagulants would be recruited if they were aged 60 years or above, living at home in Tsuen Wan district, and mentally sound/carer available. Designated nurses would conduct a pre-counseling questionnaire before the patients were discharged. Then, a clinical pharmacist would provide oral anticoagulant counseling to the patients.
the patients returned home, Integrated Care and Discharge Support (ICDS) Team nurses would provide weekly home follow-up to them. A 4-week post-counseling questionnaire would be conducted by ICDS nurses. Besides, an 8-week post-counseling phone satisfaction survey would also be carried out by trained staff.

**Result**
From February to December 2017, 62 patients completed the post-counseling questionnaire and 53 patients completed the satisfaction survey. There was about 122% increase in patients’ anticoagulant knowledge (baseline mean: 3.7±1.98 vs. 4-week-post mean: 8.2±1.52, p<0.001). This increase was dramatic and statistically significant. In the satisfaction survey, for the statement "overall, I am satisfied with the service", patients gave a mean score of 4.8 out of 5. Moreover, the mean scores of satisfaction on pharmacists and nurses were 4.7 and 4.9 out of 5 respectively.