

Parenteral Iron Therapy

REDINGTON FAIRVIEW GENERAL HOSPITAL
Skowhegan, Maine 04976

Diagnosis:

- ☐ Iron deficiency anemia
☐ Anemia of chronic kidney disease – stage_____ (required)
☐ Other:_____

Required:

Patient weight_____	Attached: <input type="checkbox"/> office note <input type="checkbox"/> current medication list <input type="checkbox"/> problem list <input type="checkbox"/> allergy list		
Date_____ of most recent:	Hgb_____	Hct_____	Ferritin_____
	Iron:_____	TIBC_____	%Sat_____

Pre-meds: None indicated if no previous reaction. Diphenhydramine is not indicated, regardless of history.

- ☐ Methylprednisolone 125mg IV push 30 minutes prior to iron infusion.

Check one	NOTE - Pregnant patients can be managed with any regimen.
<input type="checkbox"/>	Iron sucrose (Venofer) 250mg elemental iron – no more frequently than every other day, for 4 doses. IVPB 250 mls NS. Infuse first dose over 60 minutes. If tolerated, infuse remaining doses over 30 minutes, unless history of adverse reaction to iron infusion.
<input type="checkbox"/>	Iron Dextran (INFeD): Initial - administer test dose of 25 mg in sodium chloride 0.9% 50 mL over 30 minutes. If no reaction after 60 minutes observation time, administer 975mg in sodium chloride 0.9% 250 mL over 1 hour <input type="checkbox"/> <i>Patient with a history of asthma or more than 1 drug allergy: pretreat with methylprednisolone 125mg IV and famotidine 10 mg IV 30 minutes prior to test dose and all subsequent doses.</i>
<input type="checkbox"/>	Ferumoxitol (Feraheme) Two-dose regimen: 510 mg in 100mls NS over at least 15 minutes; Repeat after 3 to 8 days. Place patient in reclined or semi-reclined position during infusion;

- Educate the patient about the side effects of IV Iron.
 - Ask patient about recent health. (“Have you been feeling well lately?”) Discuss any symptoms that may mimic allergic or adverse reactions to iron infusion with the provider, before proceeding.
 - Warn patients that they may experience self-limiting fever, joint pain, muscle aches and even a mild rash during the infusion or within the first 24 hours after. This is not an allergic reaction. Other common side effects include diarrhea, abdominal pain, nausea, constipation, headache and transient minty taste.
 - Patient should be instructed to seek immediate medical care if they experience difficulty breathing or severe dizziness.
- Determine and document vital signs before the injection, every 15 minutes for the first 30 minutes, and then every hour until complete, **and 30 minutes after complete.**
- If the patient experiences fever, joint or muscle pains during infusion, stop the infusion and assess. If the patient experiences hypotension, breathing difficulties tachycardia or peri-orbital edema, contact provider or transfer to ER for assessment. Otherwise, resume therapy once symptoms resolve. If mild symptoms persist for more than 30 minutes, administer methylprednisolone 125mg IV x1 and resume treatment.

FOR OUTPATIENT THERAPY: If pregnant – Fax to BC 474-7235 and call BC desk at 858-2405.
❖ All others - Fax order sheet to (207) 858-2415 & Call Infusion clinic Med/surg charge nurse (207) 858-2414
❖ Direct patient to Infusion clinic on Med/Surg on scheduled day, unless otherwise specified.

Provider_____ Date_____ time_____

Reviewed: 8/24

Copy: Pharmacy Res, Phillips vital sign template, rfgh.net

MT: Pharmacy Order String – INFED, INJECTAFER, FERAHEME,

Order set: IRONINFUSION

Protocol - IRONINF

Originator: Pharmacy

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