## 

# Home Hemodialysis Standing Orders -Iron

### Iron Sucrose (Venofer) (ICD10 - D63.1)

- **1. Goal:** Iron saturation 30 50%; Ferritin 500 800 ng/ml.
- **2. Labs:** (ICD10 = E83.10)
  - a. Draw iron studies (iron saturation and ferritin) monthly until TSAT  $\geq$  25% then quarterly in January, April, July and October.
  - b. Draw iron studies (iron saturation and ferritin) monthly when EPO dose >15,000 units/week.
  - c. Iron labs must be drawn at least 7days after last IV iron dose or transfusion.
- **3. ESA's:** Do not start ESA's until iron saturation is  $\geq 25\%$ .
- **4. Administration:** Give Venofer IV push over 2 minutes.
- **5. Infection/Antibiotics:** HOLD IV iron if patient has signs of significant infection or is on antibiotics.

#### 6. Dosing:

- a. Test Dose (First Dose Only):
  - Administer Venofer test dose of 0.5 cc (100mg/5cc vial) over 3 minutes for the first dose only to assure no allergic reaction.
    Wait 3 minutes, and then give the remainder.
  - ii. Observe the patient in the dialysis unit for 30 minutes following the initial dose of IV iron to watch for possible drug reactions.
- b. Patients transferring from in-center will be converted to Venofer per home dialysis programs iron protocol.
- c. When possible give 2x/week doses on the first and last day of the week.
- d. Based on patient's most recent iron studies give Venofer per tables below.
- e. For high Hgb, refer to EPO S/O.

Patient Name \_\_\_\_\_

NKC# \_\_\_\_\_

#### **Northwest Kidney Centers**

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If	And	And		
New to HH	Ferritin	Iron	Timing	Venofer Dose
Program		Saturation		
	< 800	< 25%	1 <sup>st</sup> week	Give 200 mg IV push x 2 doses. Each dose should be separated by at least 1 clinic day.
			2 <sup>nd</sup> week	Give 200 mg IV push x 2 doses. Each dose should be separated by at least 1 clinic day.
			2 WCCK	Draw follow up iron studies 7 days after last dose and follow S/O.
			3 <sup>rd</sup> week	Give 200 mg IV push
		25 - 35%	1 <sup>st</sup> week	Give 200 mg IV push x 2 doses. Each dose should be separated by at least 1 clinic day.
			2 <sup>nd</sup> week	Draw follow up iron studies 7 days after last dose and follow S/O.
		36 - 50%	1 <sup>st</sup> week	Give 200 mg IV push
			2 <sup>nd</sup> week	Draw follow up iron studies 7 days after last dose and follow S/O.
		> 50%		Hold Venofer Redraw iron studies with next quarterly draw, and resume protocol.

If	And	And	
Maintenance HH Program	Ferritin	Iron Saturation	Venofer Dose
	< 800	< 25%	Give 200 mg IV push every 2 weeks
		25 - 50%	Give 200 mg IV push every month
		> 50%	Hold Venofer Redraw iron studies with next quarterly draw, and resume protocol.

If All HH Program Patients	And Ferritin	And Iron Saturation	Venofer Dose
	> 800	> 20%	Hold IV Venofer Redraw iron studies with next quarterly draw, and resume protocol.
		≤ 20%	Check with nephrologist

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#### 7. Hemoglobin:

- a. If hemoglobin  $\geq$ 12, iron saturation >30%, and ferritin >800, hold Venofer.
- b. If hemoglobin  $\geq$ 12, iron saturation  $\leq$ 30%, and ferritin  $\leq$ 800, contact MD for direction.
- c. If Hemoglobin  $\geq$ 12, iron saturation  $\leq$ 30%, and ferritin >800 contact MD for directions.

Physician Name (Please Print) RN Name (Please Print)

Physician signature (see Initial order) RN signature

Date

Patient Name \_\_\_\_\_ NKC# \_\_\_\_\_