



fraserhealth

# Pre-printed Order for Parenteral Iron Sucrose Infusion - Adult



Form ID: DRDO107057A

Rev: Sept 27, 2018

Page: 1 of 1

DRUG & FOOD ALLERGIES

- **Mandatory**     **Optional: Prescriber check (✓) to initiate, cross out and initial any orders not indicated.**

**Any required out-patient laboratory tests are to be arranged from physician's office.**

**Indications for parenteral iron therapy, select one:**

- Intolerance to oral iron and/or absorption issues
- Iron deficiency secondary to Chronic Kidney Disease
- Severe iron deficiency
- Other \_\_\_\_\_

Relevant patient history:

Physician's office to send all relevant bloodwork to outpatient department.

- **iron sucrose dose:**
  - iron sucrose** 100 mg IV - infuse over a minimum of 15 minutes
  - iron sucrose** 200 mg IV - infuse over 1 hour
  - iron sucrose** 300 mg IV - infuse over at least 1.5 hours
- **Frequency and duration of iron sucrose:**
  - one time only
  - once weekly x \_\_\_\_\_ weeks
  - once monthly x \_\_\_\_\_ months
  - once every \_\_\_\_\_ weeks x \_\_\_\_\_ weeks
  - other \_\_\_\_\_

**Management of Side Effects:**

See PDTM **iron sucrose complex** monograph for all possible side effects.

For hypotension, severe nausea, vomiting or diarrhea, sudden headache, fever, flushing or malaise, sudden muscular pain and cramps:

- Hold infusion x 30 minutes
- If symptoms improve resume infusion at half previous rate
- If symptoms persist give **sodium chloride** 0.9% 500 mL bolus and call physician

If anaphylactic reaction occurs:

- Stop infusion immediately and call physician
- Initiate O2 by mask 10 to 15 L
- **diphenhydrAMINE** 25 to 50 mg IV x 1 dose
- **epinephrine** 0.5 mg IM STAT

| Date (dd/mm/yyyy) | Time | Prescriber Signature | Printed Name and College ID# |
|-------------------|------|----------------------|------------------------------|
|                   |      |                      |                              |

Pre-printed Order for  
**Parenteral Iron Sucrose Infusion - Adult**

Back of Page 1

**Dosage Guideline:**

Usual dose in chronic kidney disease patients:

100 to 300 mg IV administered as a total cumulative dose of 1000 mg over a 14 day period  
(e.g. 200 mg for 5 sessions over 14 days)

Hemodialysis patients:

iron repletion: 100 mg IV twice weekly for five weeks  
iron maintenance: 100 mg IV once or twice monthly

Sourced from Fraser Health PDTM

Sample Form - for Educational Purposes Only