



fraserhealth

Regional Pre-Printed Orders for Iron Sucrose Infusion - Adult (Inpatient and Outpatient)

BH/MMH/ERH Pilot



Form ID: DRDO107377A

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DRUG & FOOD ALLERGIES

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

- For referrals to Mission Memorial Hospital only: Consult Internal Medicine

SECTION A- CRITERIA - Failure to fully complete this section will delay therapy.

Select at least one of the following underlying conditions

- Malabsorption of iron due to inflammatory bowel disease, celiac disease, or gastrointestinal resection
- Continued blood loss (i.e. gastrointestinal, trauma, menorrhagia)
- Perioperative correction of iron deficiency anemia
- Chronic kidney disease
- Other medical condition: _____

Select at least one reason for inability to use oral iron

- Patient is unable to receive any medications via oral route
- Patient's condition is considered imminently life-threatening
- Intolerance to adequate oral iron trial. See back of page 1.
- Inadequate response to adequate oral iron trial. See back of page 1.

Supporting labwork: prescriber **MUST** complete with values from past 2 months

Bloodwork Date	Hemoglobin (g/L)	Ferritin (mcg/L) OR Transferrin Saturation (%)

SECTION B: MEDICATIONS - See back page for further dosing information.

- For severe anemia with hemoglobin less than 110 g/L AND either ferritin less than 30 mcg/L or transferrin saturation less than 22%, give

iron sucrose 300 mg IV Q _____ days x _____ doses (maximum 3 doses)

- For patients with mild to moderate anemia with hemoglobin greater than or equal to 110 g/L, give

iron sucrose 300 mg IV x 1 dose as a trial (must provide rationale for use):

- Exceptional circumstances for deviation from criteria above (for use by Internal Medicine or Hematology only, see details on reverse):

Date (dd/mm/yyyy)	Time	Prescriber Signature	Printed Name <u>and</u> College ID#

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Oral Iron Trials

- Cumulative duration of oral trial should be at least 3 months.
- Aim for a minimum of 100 mg elemental iron per day.
- If patient has had intolerable nausea on daily dosing, trial alternate day dosing
- Examples of adequate oral iron trials:
 - o 200 mg elemental iron administered with 500 mg vitamin C PO daily on an empty stomach (if tolerated) for 3 months
 - o 100 to 200 mg elemental iron PO QHS three times a week (e.g. every Monday, Wednesday and Friday) for 3 months (for patients who are unable to tolerate daily iron)

Dosing for iron sucrose

- Repeat doses for iron sucrose should be separated from the previous dose by a minimum of 4 days.

Monitoring response to trial dose

- Monitor patient's symptoms, hemoglobin and ferritin one month or later after administration of trial dose. If desired response has not been achieved, consider additional iron sucrose.

Exceptional Cases

- In circumstances where iron sucrose may be warranted but patient does not meet criteria, most responsible physician/family physician to arrange consult with internal medicine or hematologist.
- Internal medicine physician or hematologist to document rationale for exceptional provision of iron sucrose on PPO.

Sample Form - for Educational Purposes Only