



DOB

Height (cm):	
Weight (kg):	
BSA (m2):	
Allergies:	

Place Patient Barcode Here

## Iron Sucrose (Venofer) IV Infusion

Admit to:	Diagnosis:	Infusion Date:	
Line Type:	🖂 Topica	al anesthetic per protocol	
Port 🛛 Broviac 🗆 PICC 🔅 Place Peripheral IV 🛛 🖾 Normal saline (NS)/heparin flush per protoc		al saline (NS)/heparin flush per protocol	
Premedications: [not routinely recommended prior to iron sucrose];			
Other:			
Iron Sucrose IV: 2.5 – 7 mg/kg/dosemg [max dose = 300 mg] dilute in 0.9% NS to concentration ≥ 1 mg/mL and			
infuse depending on total dose:			
□ Doses $\leq$ 100 mg infuse over $\geq$ 30 min			
□ Doses > 100 and $\leq$ 200 mg infuse over $\geq$ 60 min			
□ Doses > 200 and ≤ 300, infuse over ≥ 90 min			
Other: infuse over minutes.			
Nursing Orders:			
Obtain weight and vital signs prior to infusion			
Obtain vital signs every 15 minute during infusion			
Obtain the following labs with IV or central line access prior to the start of infusion:			
□ CBC □ Retic □ Ferritin □ Iron □ TIBC □ % saturation □ Other:			
Call lab for results prior to starting infusion **Fax all lab results to ordering provider**			
□ Monitor patient $\ge$ 30 min after infusion is complete			
May discharge after infusion/monitoring is complete			
PRN Medications:			
Acetaminophen (15 mg/kg) =mg [max 650 mg] PO once PRN mild pain			
Ondansetron (0.15 mg/kg) = mg [max 8 mg] IV once PRN nausea			
**Keep epinephrine for anaphylaxis at the bedside**			
For Anaphylaxis (Call a Code Blue):			
<pre>&lt; 10 kg: Epinephrine 1 mg/mL (0.01 mg/kg) = mg IM once</pre>			
10 to < 25 kg: Epinephrine 0.15 mg auto-injector (EpiPen Jr.) IM once			
□ ≥ 25 kg: Epinephrine 0.3 mg auto-injector (EpiPen) IM once			
Medications for Allergic Reaction (e.g., hives/itching/flushing):			
If allergic reaction occurs, call ordering provider immediately and give all medications ordered below. If allergic reaction is anaphylaxis, give			
epinephrine first. Do not delay administering medications on provider response. If ordering provider does not respond in 15 minutes call a			
Code Blue.			
Diphenhydramine (1 mg/kg) = mg	(max 50 mg) IV once (must wait at lease	t four hours from any prior dose)	
Famotidine (0.5 mg/kg) = mg (max 20 mg) IV once			
Methylprednisolone (2 mg/kg) =	mg ( <u>max 60 mg</u> ) IV once (must wait six	hours from any prior steroid dose)	
Orders good until this date: Infusion Frequency:			
Provider's Signature:			
Provider's Printed Name:			

