

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 > 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. Administration:** Give Venofer IV push over 2 minutes.
- **4. Infection/Antibiotics:** HOLD IV iron if patient has signs of significant infection or is on antibiotics.
- 5. Dosing:
 - a. Test Dose (First Dose Only):
 - i. 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# |
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| If | And | And | | | |
|--|----------------|--|----------------------|---|--|
| New to HH | Ferritin | Iron | Timing | Venofer Dose | |
| Program | | Saturation | | | |
| | < 800 | < 25% | 1 st week | Give 200 mg IV push x 2 doses. Each dose should be separated by at least 1 clinic day. | |
| | | | 2 nd week | Give 200 mg IV push x 2 doses. Each dose should be separated by at least 1 clinic day. | |
| | | | 3 rd week | Give 200 mg IV push Draw follow up iron studies 7 days after last dose and follow S/O. | |
| | | 25 - 35% | 1 st week | Give 200 mg IV push x 2 doses. Each dose should be separated by at least 1 clinic day. | |
| | | | 2 nd week | Draw follow up iron studies 7 days after last dose and follow S/O. | |
| | | 36 - 50% | 1 st week | Give 200 mg IV push | |
| | | | 2 nd 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. | |
| | | | | | |
| | A | A | | | |
| If | And | And | | | |
| Maintenance HH Program | Ferritin | Iron Saturation | | Venofer Dose | |
| Maintenance | | Iron | | Venofer Dose Give 200 mg IV push every 2 weeks | |
| Maintenance | Ferritin | Iron Saturation | | | |
| Maintenance | Ferritin | Iron Saturation < 25% | | Give 200 mg IV push every 2 weeks Give 200 mg IV push every month Hold Venofer Redraw iron studies with next quarterly draw, | |
| Maintenance | Ferritin | Iron Saturation < 25% 25 - 50% | | Give 200 mg IV push every 2 weeks Give 200 mg IV push every month Hold Venofer | |
| Maintenance | Ferritin | Iron Saturation < 25% 25 - 50% | | Give 200 mg IV push every 2 weeks Give 200 mg IV push every month Hold Venofer Redraw iron studies with next quarterly draw, | |
| Maintenance HH Program | Ferritin < 800 | Iron Saturation < 25% 25 - 50% > 50% | | Give 200 mg IV push every 2 weeks Give 200 mg IV push every month Hold Venofer Redraw iron studies with next quarterly draw, and resume protocol. | |
| Maintenance HH Program | Ferritin < 800 | Iron Saturation < 25% 25 - 50% > 50% And | | Give 200 mg IV push every 2 weeks Give 200 mg IV push every month Hold Venofer Redraw iron studies with next quarterly draw, and resume protocol. | |
| Maintenance HH Program If All HH Program | Ferritin < 800 | Iron Saturation < 25% 25 - 50% > 50% And Iron | | Give 200 mg IV push every 2 weeks Give 200 mg IV push every month Hold Venofer Redraw iron studies with next quarterly draw, and resume protocol. | |
| Maintenance HH Program If All HH Program | Ferritin < 800 | Iron Saturation < 25% 25 - 50% > 50% And Iron | | Give 200 mg IV push every 2 weeks Give 200 mg IV push every month Hold Venofer Redraw iron studies with next quarterly draw, and resume protocol. | |

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6. Hemoglobin:

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

| Matthew Rivara, MD | |
|-------------------------------|------------------------|
| Physician Name (Please Print) | RN Name (Please Print) |

| Patient Name N | IKC# | |
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