

Peritoneal Dialysis Programs Standing Orders – Iron

Iron Sucrose (Venofer) (ICD10 = D63.1)

1. **Goal:** Iron saturation 25 - 35%; Ferritin <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. Wait a minimum of 7 days after the last dose of iron prior to re-drawing iron labs.
3. **Administration:** Dilute in a minimum of 50 ml NS for IV infusion over 20 – 30 minutes.
4. **Dosing:**
 - a. **First Dose:** 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 Iron Sucrose (Venofer) per home dialysis programs iron protocol.
 - c. Based on patient’s most recent iron studies give Iron Sucrose (Venofer) per tables below:

If	And	And		
	Ferritin	Iron Saturation	Timing	Iron Sucrose (Venofer) Dose
New to PD Program	\leq 800	< 25%	1 st week (Training)	Give 200 mg
			2 nd week	Give 200 mg
		25 - 35%	1 st week (training)	Give 200 mg
		> 35%		Hold Iron Sucrose (Venofer)
	> 800	< 25%		Check with nephrologist
		\geq 25%		Hold Iron Sucrose (Venofer)

Northwest Kidney Centers

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If	And	And		
Maintenance PD Program	Ferritin	Iron Saturation	Timing	Iron Sucrose (Venofer) Dose
	≤ 800	< 25%		Give 200 mg q 2 weeks x 2 doses and recheck iron studies at next monthly visit.
		25 - 35%		Give 200 mg
		> 35%		Hold Iron Sucrose (Venofer)
	> 800	< 25%		Check with nephrologist
		≥ 25%		Hold Iron Sucrose (Venofer)

5. Hemoglobin >12:

If hemoglobin ≥12, iron saturation ≤25%, contact MD for direction.

6. Infection/Antibiotics: HOLD IV iron if patient is on antibiotics.

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