

Iron supplementation - pre-dialysis and peritoneal dialysis patients:

See Flow Chart: Iron Replacement Protocol for Peritoneal Dialysis

IRON REPLETE:

[Ferritin 300 – 800 ug/L and TSAT 20 – 50%]

No IV Iron to be given

IRON DEFICIENCY:

[Ferritin < 300 ng/ml and/or TSAT < 20%]

- Maintain patients with a Ferritin > 300 ug/L in order to prevent iron deficiency occurring as booking appointments in ambulatory care can take time
- Iron levels may drop even further making iron and ESA management more complicated

Indications for intravenous iron infusion:

- Hb < 100 g/L
- Intolerance to oral iron
- Iron deficiency or suboptimal response to ESA therapy despite oral iron supplementation
- Last IV iron > 6 months ago
 - If < 6 months, consultant to review
- No blood loss

Intravenous iron infusion:

- Use a peripheral cannula
 - do not use AV fistula/ graft arm
- An AV fistula/graft must not be used for iron infusions

Recommended dosage schedule:

- 500 mg to 1000 mg of iron administered IV in a single infusion
- Alternatively, 250 mg IV iron weekly for 4 doses

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Initial dose:

- Dilute dose in 500 mls 0.9% normal saline and infuse over 4 hours via an infusion control device at a rate of 15 mls/hr for the first 30 minutes
 - (set rate to 15 mls/hr and volume 7.5 mls)
- In the absence of a reaction, increase pump speed to 120 mls/hr

Subsequent doses:

- Dilute dose in 500 mls 0.9% normal saline and give over 4 hours
 - when unsure whether this is the patient's first dose or the first dose was given more than 12 months ago please use the initial dose regime.

Indications for not using IV Iron:

- Hb > 100 g/L
- Suspected or known allergies to Iron Polymaltose (Ferrosig) or Venofer

Pathway for organising IV iron supplementation for pre-dialysis and peritoneal dialysis patients

DOCTOR/NURSE:

1. Doctor to sign ACU (Ambulatory Care Unit) admission/referral form
2. State 1st dose or maintenance dose (any dose after the 1st dose)
3. Doctor to write internal script for iron
4. Nurse to call ACU and book appointment for patient – note the appointment time on the referral form
5. Fax referral form to ACU
6. Give original referral form and script to patient including a letter with instructions and contact details for ACU
7. All days available except Thursdays
8. Cost: Approximately \$5 pensioner, \$25 non-pensioner

PATIENT:

1. To contact ACU if they need to change or cancel their appointment
2. For 1st dose patients can expect a **full day admission** and will be in a **bed**
3. For maintenance dose (any dose after the 1st dose) patient can expect a shorter admission and will be in a **chair**

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