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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Patient:**  **FERAHEME (ferumoxytol)** | | | | | | | **DOB:** | | | |
| \*\*check appropriate box\*\*  **\*\*All orders with ☒ will be placed unless otherwise noted\*\*** | | | | | | | | | | |
| **Required lab results and/or tests prior to scheduling:**  Erythropoietin, CBC w/ Differential, Iron and TIBC, Ferritin | | | | | | | | | | |
| **ICD 10/Primary Diagnosis:** | | **ICD10/Secondary Diagnosis:** | | | | **Dialysis Patient**  **Non-Dialysis Patient** | | | | |
| **Height:** | **Weight:** | | | | | **Allergies:** | | | | |
| **Infusion Therapy** | | | | | | **Frequency** | | | | |
| ferumoxytol (FERAHEME) 510 mg in sodium chloride 0.9 % 50 mL IVPB | | | | | | 2 treatments 3-8 days apart | | | | |
| **Pre-Medication  NO PRE-MEDICATION REQUIRED** | | | | | | | | | | |
| **Pre-medications administered 30 min prior to infusion** | | | | | | | | | | |
| **Medication** | | | | **Dose** | **Route** | **Medication** | | | **Dose** | **Route** |
| Benadryl | | | |  | IVP | Tylenol | | |  | PO |
| Benadryl | | | |  | PO |  | | |  |  |
| Decadron | | | |  | IVP |  | | |  |  |
| **PRN MEDS:**  N/A | | | | | | **PRN EMERGENCY MEDS:**  Per Facility protocol  Provider requested Emergency Medication  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **Labs** | | | | | | | | | | |
| **Labs drawn prior to scheduling infusion (results provided) -**  CBC w/o Diff, Ferritin, Iron and TIBC  **Labs to be drawn over treatment course by facility:**   **NO LABS REQUIRED** | | | | | | | | | | |
| **LAB** | | | **FREQUENCY** | | | **LAB** | | **FREQUENCY** | | |
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| **Provider Communication** | | | | | | | | | | |
| **Ferumoxytol considerations:**  No test dose is recommended PRIOR TO FIRST INFUSION  1. Labs to evaluate Iron should be obtained no sooner than 30 days after the second dose.  2. MRI test interference. Ferumoxytol can alter MRI studies for up to 3 months post treatment.  3. Second dose can be given 3 - 8 days after first dose.  4. Patients with multiple drug allergies may be at higher risk of having an allergic reaction to Ferumoxytol. | | | | | | | | | | |
| **Nursing Communication/Orders** | | | | | | | | | | |
| **Notify Provider if:**  Ferumoxytol: Admin time should NOT be shorter than 15 minutes.  Hold treatment and notify provider:  1. HGB GREATER THAN 10  2. Transferrin Sat GREATER THAN 30%  3. Ferritin GREATER than 500 ng/mL  4. Diagnosis and indications not complete  5. Signs and symptoms of active infection.  6. Do NOT give to patients with history of hypersensitivity to Ferumoxytol or other IV iron products.  7. MRI test interference. Ferumoxytol can alter MRI studies for up to 3 months post treatment.  8. Patients with multiple drug allergies may be at higher risk of having an allergic reaction to Ferumoxytol  1. Monitor vital signs pre, 15-, and 30-min post infusion. Observe patient for at least 30 minutes post infusion or until clinically stable.  2. Monitor closely for acute hypersensitivity reactions including urticaria, pruritis, rash and notify provider.  3. Infuse for not shorter than 15 minutes. | | | | | | | | | | |