

Ferumoxytol (Feraheme) Initial and Repeat Dose

Ferumoxytol (Feraheme) 510 mg, repeat dose x1 3-8 days after

Protocol Types

Infusion Treatment 1, Infusion Treatment 2, Infusion Treatment 3, Infusion Treatment 4

Patient name: _____ DOB: _____

Please include: ☐ Patient face sheet ☐ Insurance authorization (if other than Medicaid or non-Advantage Medicare) Diagnosis: _____

Review: Every 358 days

Orders

	Interval	Defer Until	Duration
Provider Communication			
☒ Provider communication	Every visit		2 treatments

Routine, Until discontinued Starting when released Until Specified
Proceed with caution in patients with active systemic infection.

Ferumoxytol is contraindicated in patients with a history of allergic reaction to any intravenous iron product

Provider must order and obtain a ferritin prior to patient being scheduled for iron infusion

Ferumoxytol administration may alter magnetic resonance (MR) imaging, conduct anticipated MRI studies prior to use

MR imaging alterations may persist for less than or equal to 3 months following use, with peak alterations anticipated in the first 2 days following administration.

If MR imaging is required within 3 months after administration, use T1- or proton density-weighted MR pulse sequences to decrease effect on imaging.

Do not use T2-weighted sequence MR imaging prior to 4 weeks following ferumoyxtol administration.

Pre-Procedure Labs

☐ Hemoglobin and hematocrit, blood	Once		1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ Ferritin	Once		1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ Iron + transferrin + TIBC	Once		1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER)			

Post-Procedure Labs

☐ Hemoglobin and hematocrit, blood	Once	S+30	1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			
☐ Ferritin	Once	S+30	1 treatment
Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER), Routine			

	Interval	Defer Until	Duration
☐ Iron + transferrin + TIBC Status: Once, Expected: S, Clinic Collect, Blood, Venous, Blood, AH INTERNAL LAB (BEAKER)	Once	S+30	1 treatment
Nursing Orders			
☒ Treatment conditions Until discontinued Starting when released Until Specified Hold treatment and notify provider if Ferritin GREATER THAN 300 ng/mL TSAT GREATER THAN 45% Temp GREATER THAN 38 C	Every visit		Until discontinued
☒ Nursing communication Once Starting when released Instruct patient to set follow up appointment with provider for follow up labs.	Treatments: 2		Until discontinued
☒ Nursing communication Until discontinued Starting when released Until Specified VITAL SIGNS For Ferumoxytol infusion, monitor and record vital signs at conclusion of infusion, 30 min post infusion and immediately prior to discharge.	Every visit		2 treatments
MONITORING Patient may experience hypotension during infusion, ensure patient is in a reclined or semi-reclined position during the ferumoxytol infusion. Observe for signs or symptoms of hypersensitivity reactions during and for at least 30 minutes following infusion. Hypersensitivity reactions have occurred in patients in whom a previous ferumoxytol dose was tolerated.			
Therapeutic Medications			
☒ Nursing communication Until discontinued Starting when released Until Specified Administer first dose of ferumoxytol (Feraheme) followed by repeat dose 3-8 days after.	Every visit		2 treatments
☒ ferumoxytol (Feraheme) 510 mg in sodium chloride 0.9 % 117 mL IVPB 510 mg, intravenous, Administer over: 15 Minutes, Once, Starting when released	Once		1 treatment
☒ ferumoxytol (Feraheme) 510 mg in sodium chloride 0.9 % 117 mL IVPB 510 mg, intravenous, Administer over: 15 Minutes, Once, Starting when released	1 time a week	S+3	1 treatment
Emergency Medications			
☒ Nursing communication STAT, Until discontinued Starting when released Until Specified If hypersensitivity reaction occurs, stop infusion IMMEDIATELY and CALL provider.	PRN		Until discontinued
☒ Vital Signs STAT, Every 15 min Starting when released If a hypersensitivity reaction occurs, perform vital signs every 15 minutes for one hour, then every 30 minutes for 2 hours.	PRN		Until discontinued
☒ Nursing communication Once Starting when released If hypersensitivity reaction occurs: - Elevate head of bed 30 degrees and place patient's head at 30 degree angle if possible - Start 2 liters oxygen per nasal cannula and maintain airway - Change and maintain IV line with 1000 mL 0.9% Normal Saline	PRN		Until discontinued
☒ Nursing communication Until discontinued Starting when released Until Specified Avoid intravenous or oral diphenhydrAMINE, move to next option in the algorithm. Adverse effects of diphenhydrAMINE may overlap with IV iron adverse effects such as flushing, hypotension, tachycardia.	PRN		Until discontinued

	Interval	Defer Until	Duration
☒ sodium chloride 0.9 % infusion 30 mL/hr, intravenous, Continuous PRN, KVO, Starting when released, for 1 day	PRN		Until discontinued
☒ sodium chloride 0.9 % bolus 500 mL, intravenous, Administer over: 30 Minutes, Once as needed, hypersensitivity or infusion reaction, Starting when released, Until Discontinued For severe reaction: respiratory distress, stridor, wheezing, hypotension (SBP LESS THAN 100 mm Hg)	PRN		Until discontinued
☒ albuterol 2.5 mg /3 mL (0.083 %) nebulizer solution 2.5 mg 2.5 mg, nebulization, Every 4 hours PRN, Hypersensitivity reaction, Starting when released, for 1 day	PRN		Until discontinued
☒ albuterol HFA 90 mcg/act inhaler 2 puff 2 puff, inhalation, Every 4 hours PRN, Hypersensitivity reaction, Starting when released, for 1 day SHAKE WELL	PRN		Until discontinued
☒ acetaminophen (Tylenol) tablet 650 mg 650 mg, oral, Once as needed, fever, GREATER THAN or EQUAL TO 38 C, Starting when released, for 1 dose For mild/moderate reaction: flushing, rash, pruritus	PRN		Until discontinued
☒ famotidine (Pepcid) IV 20 mg 20 mg, intravenous, Administer over: 15 Minutes, Once as needed, dose for hypersensitivity or infusion reaction, Starting when released, for 1 dose	PRN		Until discontinued
☒ hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg 100 mg, intravenous, Once as needed, Hypersensitivity reaction, Starting when released, for 1 dose For mild/moderate reaction: flushing, rash, pruritus - OR - For severe reaction: respiratory distress, stridor, wheezing, hypotension (SBP LESS THAN 100 mm Hg)	PRN		Until discontinued
☒ EPINEPHrine (EpiPen;Adrenalin) injection solution 0.3 mg 0.3 mg, intramuscular, Once as needed, Hypersensitivity reaction, Starting when released, for 1 dose For severe reaction: respiratory distress, stridor, wheezing, hypotension (SBP LESS THAN 100 mm Hg)	PRN		Until discontinued

Appointment Requests

☒ Infusion Appointment Request Status: Once, Expected: S, Sched. Duration: 60 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after	Once		1 treatment
☒ Infusion Appointment Request Status: Once, Expected: S, Sched. Duration: 60 minutes, Sched. Tolerance: Schedule appointment at most 3 days before or at most 3 days after	1 time a week	S+3	1 treatment

*Provider signature

Provider printed name

*Date

Time

*Provider phone#

***Denotes field that must be completed by healthcare worker**