



Fax: _____ Phone: _____

Name _____

DOB _____ ID# _____

Weight _____ Date _____

Venefor (Iron)

Diagnosis: (ICD-10 code) _____ - Description _____

For Provider

- Review orders
- Consider 125mg methylprednisolone for allergy
- Consider contraindications such as non iron deficient anemia, allergy to iron preps, cirrhosis of the liver, chronic infection, severe asthma
- Infusions should be calculated by how much increase in HB you desire
- Infusions should be 3 times a week max

Outpatient Medications

- Have anaphylaxis box nearby with typical medications (Ie epinephrine)

Infusion Medication

Venefor (Iron)

Dose: First infusion: 25mg test dose over 15 minutes, then _____ mg over next 45 minutes

Subsequent : _____ mg (max 200mg) for 60 minutes over next _____ infusions

Postpartum treatment: 200mg per 24 hours times 3 days. (please circle if this is the infusion you desire)

Pre-Meds

Labs

CBC, CMP, Iron profile, CRP

Additional Orders

Provider Signature: _____ Date: _____

Printed Name: _____ Phone: _____ Fax: _____

