



Change order details by crossing out unwanted information and writing in desired details/instructions.  
Place a line through the **X** to remove the pre-checked option.

## IRON - FERRIC CARBOXYMALTOSE (INJECTAFER) IVPB [11500556] Columbia Network Infusion Centers

Select Location:  Southwest/Vancouver  St John/Longview Start Date: \_\_\_\_\_

Diagnosis/Indication: \_\_\_\_\_

ICD-10 Code(s): \_\_\_\_\_ Authorization Number: \_\_\_\_\_

Patient Vitals: Height \_\_\_\_\_ Weight \_\_\_\_\_

### Provider Communication Orders

To reduce delays in treatment and phone calls to your office, you may participate in the PeaceHealth formulary process by selecting this option. A clinic pharmacist will adjust orders according to PeaceHealth site approved policies and procedures.

*I agree to utilize the PeaceHealth policies & procedures that have been reviewed by the Pharmacy & Therapeutics Committee and authorized by the Medical Executive Committee of PeaceHealth. This agreement will be issued for the duration of active orders contained within this treatment plan.*

Labs	Interval
<input checked="" type="checkbox"/> Physician Communication <i>Provider to send most recent Ferritin and/or Iron Deficiency Panel Lab results with completed order.</i>	Once

Supportive Care	Interval
<input checked="" type="checkbox"/> FERRIC CARBOXYMALTOSE IVPB 750 mg IV every 7 days x 2 doses <i>Monitor patient for signs and symptoms of hypersensitivity DURING INFUSION AND FOR AT LEAST 30 MINUTES AFTER INFUSION. Hypersensitivity symptoms may include: anaphylaxis, flushing, dyspnea, tachycardia, and increased blood pressure. For patients weighing less than 50 kg, the dose will be updated to 15 mg/kg.</i>	Route: IV
<input checked="" type="checkbox"/> SODIUM CHLORIDE 0.9 % IV BOLUS <i>IV site discomfort May use 250 ml NS at 100ml/hr. Run concurrent with iron infusions as needed.</i>	PRN Route: IV

Nursing Orders	Interval
<input checked="" type="checkbox"/> Nursing Communication <i>Monitor patient for signs and symptoms of hypersensitivity DURING INFUSION AND FOR AT LEAST 30 MINUTES AFTER INFUSION. Hypersensitivity symptoms may include: anaphylaxis, flushing, dyspnea, tachycardia, and increased blood pressure.</i>	Every 7 days
<input checked="" type="checkbox"/> Nursing Communication <i>Discontinue therapy plan when treatment complete.</i>	Every visit

Vascular Access (single select)	Interval
<input type="radio"/> IV - Insert peripheral IV - sodium chloride (NS) flush 10 mL 10 mL As Needed for Line Care	Every Visit
<input type="radio"/> Central line (non-PICC) - Access vascular device and confirm patency	Every Visit

Provider Signature \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Provider's Printed Name: \_\_\_\_\_

- Initiate Central line (non-PICC) maintenance protocol
- sodium chloride (NS) flush 10 mL
  - *10 mL As Needed for Line Care prior to medication administration PRN*
- sodium chloride (NS) flush 10 mL
  - *10 mL As Needed for Line Care post medication administration PRN*
- sodium chloride (NS) flush 20 mL
  - *20 mL As Needed for Line Care post lab draw PRN*
- sodium chloride (NS) flush 10 mL
  - *10 mL for Line Care at discharge and de-access every visit*
- heparin 100 units/mL 5 mL
  - *5 mL for de-access PRN*
- alteplase (CATHFLO) injection 2 mg
  - *Other, Starting when released, For 2 dose, PRN, For clearing central line catheter. Add 2.2 mL sterile water for injection to vial; let the vial stand undisturbed to allow large bubbles to dissipate. Mix gently swirling until completely dissolved (complete dissolution should occur within 3 minutes); do not shake. Final concentration: 1 mg/mL. Retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded*

- PICC line Every Visit
  - Access vascular device and confirm patency
  - Initiate PICC maintenance protocol
  - Nursing Communication
    - Change PICC line dressing weekly and PRN*
  - sodium chloride (NS) flush 10 mL
    - 10 mL As Needed for Line Care prior to medication administration PRN*
  - sodium chloride (NS) flush 10 mL
    - 10 mL As Needed for Line Care post medication administration PRN*
  - sodium chloride (NS) flush 20 mL
    - 20 mL As Needed for Line Care post lab draw PRN*
  - alteplase (CATHFLO) injection 2 mg
    - Other, Starting when released, For 2 dose, PRN, For clearing central line catheter. Add 2.2 mL sterile water for injection to vial; let the vial stand undisturbed to allow large bubbles to dissipate. Mix gently swirling until completely dissolved (complete dissolution should occur within 3 minutes); do not shake. Final concentration: 1 mg/mL. Retain in catheter for 30 minutes to 2 hours, instill a 2nd dose if occluded*

PRN Medications	Interval	
O sodium chloride (NS) flush 10 mL <i>10 mL As Needed for Line Care</i>	PRN	Route: IV
O sodium chloride 0.9 % bolus 500 mL <i>500 mL Once for Line Care, Starting when released, For 1 dose, Run at TKO (25ml/hr)</i>	PRN	Route: IV

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Provider Signature

Date

### Time

Provider's Printed Name:

Place Patient Label Here

Page 2 of 3

EHR5002-DT (12/19/2024)

## IRON - FERRIC CARBOXYMALTPOSE (INJECTAFER) IVPB

✗ methylPREDNISolone sodium succinate (Solu-MEDROL) Injection 125 mg PRN Route: IV  
*125 mg Once As Needed IV, For shortness of breath for continued symptoms of mild to moderate drug reactions (flushing, dizziness, headache, diaphoresis, fever, palpitations, chest discomfort, blood pressure changes (>/= 20 points in SBP), nausea, urticaria, chills, pruritis) that worsen or persist, and notify provider.*

✗ EPINEPHrine (ADRENALIN) injection for Allergic Reaction 0.5 mg PRN Route: Intramuscular  
*0.5 mg Once As Needed Intramuscular, For severe drug reaction (flushing, dizziness, headache, diaphoresis, fever, palpitations, chest discomfort plus blood pressure changes (>/= 40 points in SBP), shortness of breath with wheezing and O2Sat <90%), and notify provider.*

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Provider Signature

Date

Time

Provider's Printed Name:

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Place Patient Label Here

Page 3 of 3

EHR5002-DT (12/19/2024)

IRON - FERRIC CARBOXYMALTOSE (INJECTAFER) IVPB