

IRON SUCROSE (VENOFER) TOTAL REPLACEMENT INFUSION [11500282] Therapy Plan To Be Used In Infusion Center

Infusio	n Center Location:	Start Date:		
Diagno	sis/Indication:			
Authori	ization Number:			
		DOB Height Weight		
	ortive Care	Interval		
	IRON SUCROSE IVPB ORDERABLE	Route:		
	Starting when released, For 1 dose, S Dose Frequence	Slow rate 50% for rate-related reactions like chest discomfort.		
	SODIUM CHLORIDE 0.9 % IV BOLUS	Route:		
	IV site discomfort, Starting when releasion infusions as needed. Dose Frequence.	eased, May use 250ml NS or 500ml NS at 100ml/hr. Run concurrent with		
	SODIUM CHLORIDE 0.9 % IV BOLUS	Route:		
	IV site discomfort, Starting when releation infusions as needed. Dose Frequence.	eased, May use 250ml NS or 500ml NS at 100ml/hr. Run concurrent with		
Provi	der Communication Orders	Interval		
	Physician Communication	Once		
	Starting when released Order one C	CBC with Differential, Ferritin, AND Iron prior to beginning treatment.		
	Provider Communication	Once		
	Starting when released Select most selecting a central line access set of orde	t appropriate orders (one set only) for IV access / central line - if ers, then de-select IV access.		
Nursi	ing Orders	Interval		
	Nursing Communication	Every visit		
		ient for signs and symptoms of hypersensitivity. Hypersensitivity shing, dyspnea, tachycardia and increased blood pressure.		
	Nursing Communication	Every visit		
	Starting when released Discontinue	therapy plan when treatment complete.		
	Insert peripheral IV	PRN		
	Starting when released			
	Access & Use Central Line/CVAD	PRN		
	Starting when released Access vaso	cular device and confirm patency.		
	Access & Use Central Line/CVAD	PRN		
	Starting when released Access vaso	cular device and confirm patency.		
	sodium chloride (NS) flush 10 mL	PRN Route: IV		
	Line Care, Starting when released			
	Provider Signature	EHR User ID Date Time		
Initials				
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	Initiate Central Line (Non-PICC) Maintenance Pr	rotocol PRN	
	Starting when released		
	Initiate PICC Maintenance Protocol	PRN	
	Starting when released		
	sodium chloride 0.9 % injection 10 mL	PRN	Route: IV
	Other, Line Care prior to medication admir	nistration, Starting when r	eleased
	Nursing Communication	PRN	
	Starting when released Change PICC lin	e dressing weekly and as	needed.
	sodium chloride 0.9 % injection 10 mL	PRN	Route: IV
	Other, Line Care post medication administ	tration, Starting when rele	eased
	sodium chloride 0.9 % injection 10 mL	PRN	Route: IV
	Other, Line Care prior to medication admir	nistration, Starting when r	eleased
	sodium chloride 0.9 % injection 20 mL	PRN	Route: IV
	Other, Line Care post lab draw, Starting w	hen released	
	sodium chloride 0.9 % injection 10 mL	PRN	Route: IV
_	Other, Line Care post medication adminis	tration, Starting when rele	
	sodium chloride 0.9 % injection 10 mL	PRN	Route: IV
_	Other, Line Care at discharge and de-acce		ed
	sodium chloride 0.9 % injection 20 mL	PRN	Route: IV
_	Other, Line Care post lab draw, Starting w		
	heparin, porcine (PF) 100 unit/mL flush 500 Unit		Route: IV
	Line Care, for de-access, Starting when re		
	alteplase (CATHFLO) injection 2 mg	PRN	Route: Intra-Catheter
	Other, Line Care, Starting when released, For 2 d stand undisturbed to allow large bubbles to dissip dissolution should occur within 3 minutes); do not functional lumen. Do not use lumen while dwelling on lumen for blood return. If line is still not patent, to exceed 120 min. Use second dose of Alteplase functional, aspirate and waste the medication and	ate. Mix by gently swirling shake. Final concentration g. Allow to dwell 30 minute allow medication to dwell a (Cathflo) if catheter not p	g until completely dissolved (complete on: 1 mg/mL. Instill medication in non- es and check for patency by drawing back I an additional 90 minutes. Dwell time not oatent after 120 min. If the catheter is
	alteplase (CATHFLO) injection 2 mg	PRN	Route: Intra-Catheter
_	Other, Line care, Starting when released, For 2 destand undisturbed to allow large bubbles to dissip dissolution should occur within 3 minutes); do not functional lumen. Do not use lumen while dwelling on lumen for blood return. If line is still not patent, to exceed 120 min. Use second dose of Alteplase functional, aspirate and waste the medication and	ate. Mix by gently swirling shake. Final concentration g. Allow to dwell 30 minute allow medication to dwell to (Cathflo) if catheter not p	g until completely dissolved (complete on: 1 mg/mL. Instill medication in non- es and check for patency by drawing back I an additional 90 minutes. Dwell time not patent after 120 min. If the catheter is
PRN	Medications	Interval	
	sodium chloride (NS) flush 10 mL	PRN	Route: IV
	10 mL As Needed IV Line Care, Starting wh	hen released	
	sodium chloride 0.9 % bolus 500 mL	PRN	Route: IV
	500 mL Once As Needed IV Line Care, Sta	rting when released, Run	at TKO (25ml/hr)
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Emergency Medications		Interval	Interval	
	diphenhydrAMINE (BENADRYL) injection 25-50 mg	PRN	Route: IV	
	25 to 50 mg Once As Needed IV Other, For mild to r diaphoresis, fever, palpitations, chest discomfort, blood urticaria, chills, pruritis), For 1 dose, Administer 50 mg of reaction. Administer 25 mg IV if patient has had diph resolve in 3 minutes may repeat 25mg IV dose for a to	d pressure ch IV if patient h nenhydramine	anges (>/= 20 points in SBP), nausea, has NOT had diphenhydramine within 2 hours h within 2 hours of reaction, if reaction doesn't	
	albuterol 90 mcg/actuation inhaler 2 puffs	PRN	Route: Inhalation	
	2 puffs Once As Needed Inhalation Wheezing, Shorwith infusion reaction and notify provider, Starting when			
	methylPREDNISolone sodium succinate (Solu- MEDROL) injection 125 mg	PRN	Route: IV	
	125 mg Once As Needed IV For shortness of breath reactions (flushing, dizziness, headache, diaphoresis, changes (>/= 20 points in SBP), nausea, urticaria, chill diphenhydramine (Benadryl), and notify provider, Start.	fever, palpitat s, pruritis) tha	tions, chest discomfort, blood pressure at worsen or persist after administration of	
	EPINEPHrine (ADRENALIN) injection 0.5 mg	PRN	Route: Intramuscular	
	0.5 mg Once As Needed Intramuscular Other, For social diaphoresis, fever, palpitations, chest discomfort plus to of breath with wheezing and O2Sat <90%), and notify p	olood pressur	e changes (>/= 40 points in SBP), shortness	

Provider Signature EHR User ID Date Time

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