

# Information for Patients

#### Location and Contact

South Coast Medical – Rosebud 1537 Point Nepean Road Capel Sound VIC 3940

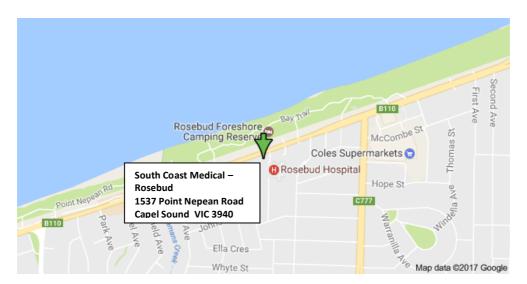
Phone: 03 5986 2155 Fax: 03 5982 2155

# Opening Hours for Iron Infusions

Monday – Friday 9:00am – 12:00pm

# To book your iron infusion, call us on 5986 2155

We are conveniently located near to Rosebud Hospital – Peninsula Health



# **Frequently Asked Questions**

#### Why is iron important?

Our bodies need iron. Iron is used to make haemoglobin – the part of our red blood cells that carries oxygen around our body. It is also important for muscle strength, energy and good mental function. If your iron levels are low this may make you feel tired and not able to do normal daily activities. As the amount of iron in the body falls even lower, the haemoglobin levels drop below normal. This is known as iron deficiency anaemia.

#### Why might I need IV Iron?

The most common way to treat iron deficiency is to take iron by mouth as a tablet or liquid. This works well for most people and is usually tried first. Some people may need iron to be given straight into the body through a vein. This is called and Intravenous (IV) iron infusion. The iron is given through a needle and dripped ('infused') into your vein. Sometimes 2 iron infusions (given at least 1 week apart) are needed to fully top up iron stores. The infusion is made up of iron, not blood.

IV iron might be needed if you:

- Are not able to take iron tablets / liquid
- Are not responding to iron tablets / liquid or not absorbing them
- Need to get your iron levels up quickly Eg. Before major surgery, late in pregnancy or to avoid blood transfusion)
- If you have chronic kidney disease or chronic heart failure

#### What happens during your appointment?

Infusion therapy involves the administration of a medication through a needle or cannula. The cannula is usually inserted into a vein in your hand or arm and is then connected to a sterile bag that contains the fluid or medication to be infused.

During your infusion our staff will measure and record your vital signs, such as blood pressure, heart rate and oxygen saturation.

# What to bring/What should I wear?

It is recommended that you wear comfortable loose-fitting clothes. Your sleeve will need to be pushed well above the elbow. This will allow our staff to more easily insert the cannula and to monitor your vital signs. As some IV fluids may make you feel cool, it is also suggested that you bring a jacket or cover to keep warm. We encourage you to relax whilst you are having your infusion, please bring reading material or something to occupy your time.

For your convenience during your treatment, we provide complimentary WiFi via Facebook. <a href="https://www.facebook.com/southcoastmedical">www.facebook.com/southcoastmedical</a>

#### Referral

A referral and a standard prescription from a General Practitioner or a Specialist is required to have an infusion.

Your doctor will have access to either a paper referral form or can locate one on our website. www.scmc.com.au

#### **Procedure Preparation**

It is important that you are well hydrated prior to your procedure. If you are able, please drink water before your treatment. If you suffer from a heart or kidney condition, please discuss the appropriate amount of hydration with your doctor.

How long will the infusion take?

Most infusions take less than 30 minutes. For patients having an iron infusion, please allow one hour as there is a 30 minute observation period post infusion.

#### Can I have an Iron Infusion whilst I'm pregnant?

Ferinject<sup>®</sup> can be given after the 1<sup>st</sup> trimester. Please consult your doctor on your suitability for an iron infusion.

Can children have iron infusions?

The minimum age for an iron infusion is 14 years but 18 years unless discussed with your paediatrician.

#### Can I bring a friend with me?

Due to the size of the suite, we prefer you to come into the suite alone. If you prefer to have someone with you during the infusion, please speak to your doctor or nurse. Your support person is more than welcome to wait in our comfortable waiting room where we provide complimentary tea/coffee and WiFi via Facebook.

#### Can I get a medical / attendance certificate?

Yes – please let our nurse know if this is required.

#### Are there any side effects with IV iron?

Generally, when side effects do occur, they are mild and settle down on their own. The most common side effects are temporary and include:

- >Headache, feeling sick or vomiting, muscle or joint pain
- >Changes in taste (eg metallic)
- >Changes to blood pressure or pulse

**Skin staining** (brown discolouration) may occur due to leakage of iron into the tissues around the needle (drip) site. **This is not common but the stain can be long lasting or permanent.** Inform the doctor or nurse straight away of any discomfort, burning, redness or swelling at the needle (drip) site.

Although very uncommon, some people may have a serious allergic reaction (anaphylaxis  $\leq 1:1,000$ ). In rare cases this can be life threatening. You will be closely monitored while IV iron is given, and for 30 minutes after. Sometimes side effects (eg. headache, muscle or joint pain) can start 1 to 2 days later. Mostly they will settle down by themselves over the next couple of days. If they worry you or interfere with your daily activities contact South Coast Medical for advice.

If you have chest pain, trouble breathing, dizziness or neck / mouth swelling, please seek urgent medical attention / call an ambulance (000).

#### How much does an iron infusion cost?

The Iron Infusion is billed an Item 36 and is rebate claimable from Medicare.

Medical consumables used as part of your treatment attract a separate fee of \$110.00. This out of pocket expense is not claimable from your private health fund or Medicare.

Payment is required at the time of the treatment. We accept cash, Visa, MasterCard and EFTPOS.

The costs of any medications are not included in the service fee.

#### Where can I park?

Free parking is available behind the clinic.

#### Book Your Intravenous (IV) Iron Infusion

South Coast Medical – Rosebud 1537 Point Nepean Road Capel Sound VIC 3940 T: 03 5986 2155

F: 035982 2155

www.scmc.com.au

www.facebook.com/southcoastmedical

## **REFERRAL TO SOUTH COAST MEDICAL**



1537 Point Nepean Road Capel Sound VIC 3940 Phone: 03 5986 2155 Fax: 03 5982 2155

www.scmc.com.au

# INTRAVENOUS (IV) IRON INFUSION - DOCTOR/SPECIALIST REFERRAL

Patient:						
DOB:						
Address:						
Phone 1:						
Clinical Inform	mation					
Weight: Ferritin: Creat: **Attach pathol Cause of Low I Medical History	ogy test results with ron Levels:	Hb: B12/Fc eGFR: in last 3 months**	olate:ster			
*Contraindication in the 1 <sup>st</sup> Trimester						
☐ Fluid Restriction ☐ Heart Failure ☐ Renal Failure						
□ Iron Order (Ferinject®)  **PLEASE ISSUE A VALID SCRIPT TO PATIENT**  Given in divided doses; maximum 1g administered per infusion — only 1 request form needed.  • Ferinject 500mg (1 vial)  • Ferinject 1.5g (3 vials — administered over 2 separate appointments)  • Ferinject 2g (4 vials — administered over 2 separate appointments)  Simplified Dose Calculator for Ferinject® Maximum Dose per Infusion is 1g (2 vials)						
	Body Weight<70kg	Body Weight≥70kg				
		2g (4 vials)				
	= 1	1.5g (3 vials)		ns are ineffective or		
			PBS: 500mg / 10ml x2 + Rpt x1)	ns are menective or		
Referring Docto	or:					
Name:						
Argus email:		Email:				
Signature:		Date:	Date:			

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**Rosebud Branch** 

1537 Point Nepean Road, Capel Sound VIC 3940 Phone (03) 5986 2155 Fax (03) 5982 2155 PO BOX 465, Rosebud VIC 3939

Dr Referring Doctor/Specialist

Line 1

Line 2

Line 3

Line 4

T: \*\*\*\*

F: \*\*\*\*

October 2020

Dear \*\*\*\*

# Does your patient require an iron infusion?

Iron deficiency is one of the most common nutritional deficiencies in Australia, and remains one of the most underdiagnosed conditions in general practice. The consequences of this condition can be subtle and the cause is often multifactorial.

At South Coast Medical, we can help. If your patient requires an iron infusion for iron deficiency anaemia, South Coast Medical's open – access clinic may be a suitable option.

South Coast Medical's *open – access iron infusion clinic* allows general practitioners and specialists alike to refer patients directly to us for their infusions.

We provide patients with a state-of-the-art medical facility providing tailored and affordable intravenous therapy for iron infusions without the wait

#### In this referral pack, please find enclosed:

- Intravenous (IV) Infusion Information Brochure (FOR PATIENT)
- > Information for Patients (FOR PATIENT)
- > MIMS Ferinject® Consumer Medicine Information (FOR PATIENT)
- South Coast Medical's Ferinject® (Iron Carboxymaltose) Infusion Protocol (FOR DOCTOR/SPECIALIST)
- Intravenous (IV) Iron Infusion Doctor / Specialist Referral Form
- Informed Consent to Receive Intravenous Iron Replacement Therapy Ferinject® Infusion Form

Please complete the referral form including any relevant pathology results and fax to **5982 2155**. South Coast Medical's GPs will assess the referral and one of our friendly staff will call the patient to arrange a suitable time for the iron infusion. Opening hours for iron infusions are Monday – Friday between 9:00am – 12:00pm. On discharge from South Coast Medical, the referring doctor / specialist will receive a discharge summary.

Should you have any questions, we are more than happy to hear from you.

Yours sincerely

The South Coast Medical Team



# Ferinject<sup>®</sup> (Iron Carboxymaltose) Infusion Protocol

South Coast Medical

This procedure is for the administration of Ferinject® (Iron Carboxymaltose) ONLY. Do not use any other form of iron; ensure you have the correct product.



#### Persons authorized

to undertake procedure includes medical practitioners and registered nurses ONLY at a the premises of South Coast Medical

# Indications

An iron infusion is indicated in patients with iron deficiency anaemia or those who are iron deficient where oral preparations have failed or are inappropriate. Fe deficiency is defined as a ferritin below 15-30ug/L

#### **Precautions**

Patients with asthma, low iron binding capacity or folic acid deficiency are at higher risk of allergic or anaphylactoid reactions

Patients with rheumatoid arthritis may be at higher risk of delayed reactions including fever and exacerbation of joint pain

Hepatic insufficiency

Cardiovascular disease

Pregnancy (Category B3) – contraindicated in first trimester, consider discussion with an obstetrician

Breastfeeding

Do not administer concurrent oral and IV iron preparations.



# **Contraindications**

Pregnancy in the first trimester
Known hypersensitivity to iron carboxymaltose
Anaemia not due to iron deficiency
Haemachromatosis
Uncontrolled hyperparathyroidism
Patients with severe infection or inflammation as iron tends to accumulate in inflamed tissues

#### Compatibility

Sodium Chloride only

#### Dosage

The adequate dose of Ferinject® must be calculated for each patient individually and must not be exceeded. For overweight patients, a normal weight/blood volume relation should be assumed when determining the iron requirement

Maximum dose of Ferric Carboxymaltose (Ferinject®) per infusion is **20mg/kg to maximum of 1000mg**. Use <u>ideal body weight</u> in overweight patients.

The first dose of Ferric Carboxymaltose (Ferinject®) is given at 20mg/kg to a maximum of 1000mg

A second dose can be given ≥1 week later to replace the remainder of the calculated total body iron deficit (see table below) but not exceeding maximum dose per infusion of 20mg/kg to a maximum of 1000mg



# Approximate total body iron deficit & dosage per infusion of Ferric Carboxymaltose (Ferinject®)

Hb	*Body weight 35 to <50 kg	*Body weight 50	*Body weight ≥70
(g/L)		to <70 kg	kg
Hb ≥100 g/L	Total deficit: 1000 mg  1st dose: 500 mg  2 <sup>nd</sup> dose: 500 mg	Total deficit: 1000 mg  1st dose: 1000 mg  2 <sup>nd</sup> dose: not required	Total deficit: 1500 mg  1 <sup>st</sup> dose: 1000 mg  2 <sup>nd</sup> dose: 500 mg
Hb	Total deficit: 1400 mg  1 <sup>st</sup> dose: 700 mg  2 <sup>nd</sup> dose: 700 mg	Total deficit: 1500 mg	Total deficit: 2000 mg
<100		1 <sup>st</sup> dose: 1000 mg	1 <sup>st</sup> dose: 1000 mg
g/L		2 <sup>nd</sup> dose: 500 mg	2 <sup>nd</sup> dose: 1000 mg

**If Hb normal or Hb <70 g/L,** or when preferred by the prescriber, calculate total body iron deficit more precisely using the Ganzoni formula.

\*Use ideal body weight in overweight/obese patients (If underweight, use actual body weight).

A *woman*'s ideal body weight (medium frame) will be ≥50kg if her height is ≥157 cm or ≥5'2

A *man's* ideal body weight (medium frame) will be ≥50kg if his height is ≥152 cm or ≥5'0

#### Emergency Medications to be on site

Adrenaline 1:1000mg /1:10,000 (IM) Hydrocortisone 100mg (IV) Promethazine 25mg (IV) IV fluid –Normal Saline

#### Equipment

Gloves

Intravenous administration set
Required ampoules of iron (Ferinject®) and check the dosage
Required volume of Sodium Chloride 0.9% usually 100mls- 250mls
Syringe/needles to draw up the iron and add to the fluid bag
70% Isopropyl Alcohol swabs
Opsite
Tape



# Administration

Ensure a medical practitioner will be in the vicinity and easily contactable for the duration of the iron infusion and for 30 minutes post infusion

Consent the patient
Check allergies
Weigh the patient
Inform the patient to notify staff is any symptoms of:

- Sudden Gastrointestinal distress and/or anxiety
- Chest tightness
- Shortness of breath
- Racing heart
- Nausea
- Pain at the cannula site

Observations including temperature, pulse, respirations, blood pressure and sighting of the cannula site for extravasation are to be taken at baseline and **5 minutely from the start of the infusion**, at the end of the infusion and at 30 minutes post infusion

Insert an intravenous cannula using the cubital fossa if feasible. Flush the cannula with 10ml normal saline 0.9% to ensure patiency, before commencing iron infusion. Ensure patient is comfortable and has no burning or pain at site when flushed.

## Add iron to the infusion fluid

- Do not draw up Ferinject<sup>®</sup> until cannula has been inserted successfully Perform hand hygiene
- Using aseptic technique, draw up the prescribed iron volume and add it to the infusion bag
- Gently rotate the infusion bag to mix the contents and prime line
- Perform hand hygiene

For stability reasons, dilutions to concentrations of less than 2mg iron/mL are not allowed



Connect the primed IV line and run the infusion over a minimum of 15 minutes, preferably 20 minutes

Patient may be discharged 30 minutes post infusion if observations are satisfactory

Remove the intravenous cannula post infusion

#### Adverse effects

## Nausea and epigastric symptoms

- Slow the rate of the infusion
- Inform the medical practitioner
- Document details of the reaction

#### Allergy (e.g. rash)

- Stop the infusion
- Contact treating doctor immediately
- Consider administration of promethazine 12.5mg to 25mg IV
- Document details of reaction

If the patient improves the infusion may be recommenced at the slowest rate.

#### **Anaphylactoid reactions**

Occur most frequently within the first several minutes of administration Generally characterized by sudden onset respiratory difficulties, tachycardia and hypotension

- Stop the infusion immediately
- Urgently inform the treating doctor
- Open the emergency trolley and prepare emergency medications
- Engage other staff to call an ambulance
- Patient should be taken to hospital and observed for 4 hours as per anaphylaxis management guidelines

# Delayed reactions (such as severe arthralgia)

Can occur particularly in patients with rheumatoid arthritis and other inflammatory diseases.



# **Tissue infiltration (extravasation)**

- Immediately stop the infusion
- Apply a cold compress
- Do not cover the site with bandages
- Mark the border with a skin pen and observe over 24 hours

If there are any questions or concerns please review the product statement on Ferinject<sup>®</sup> or discuss with the treating doctor.

# **Appendices**

# 1. Management of anaphylaxis

- Stop exposure to causative agent (if possible)
- Call for assistance
- Give adrenaline IM to lateral thigh 0.01mg/kg (maximum adult dose 0.5mg)
- Lay patient flat (elevate legs if possible)
- Gain IV access
- Give high flow oxygen and ventilate if required
- If hypotensive then gain further wide bore IV access (14-16G) and give a bolus of 20mL/kg stat
- If inadequate response repeat IM adrenaline every 3-5 minutes as needed