Prescribing and administering Venofer® (Iron Sucrose)

Step 1 – Calculate dose
The total dose of Venofer® required can be calculated individually, based on the patient's weight and haemoglobin level, using the Ganzoni formula below:

$$\text{Iron dose (mg)} = \text{Body Weight (kg)} \times \frac{(\text{Target Hb} - \text{Actual Hb (Hb in g/L)})}{10} \times 2.4 + 500^*$$

*Where the patient weighs <35kg, this number should be replace with the patient's weight in kg x 15.

The maximum single dose of Venofer® is 200mg, given up to 3 times per week. Where the total dose required exceeds 200mg, it should therefore be split up to achieve this. For example, if the total dose required is 1350mg, the patient could receive 200mg on a Monday, Wednesday and Friday for 6 doses, then one further dose of 150mg to make up the full course required.

Alternatively, for patients whose bleeding (gastrointestinal or menstrual) exceeds the ability of the gastrointestinal tract to absorb oral iron, the following treatment schedule can be followed:

- 100mg every week for 6-8 weeks then
- 100mg every month, with monthly monitoring of full blood count (FBC) and ferritin.

If Hb is maintained at >120g/l and ferritin is maintained between 300-500 micrograms/l, the infusion schedule can be reduced further to 100mg every 12 weeks.

Step 2 – Prescribe on electronic prescribing
For inpatients only, the full course of Venofer® should be prescribed on the Hospital Electronic Prescribing and Administration (HEPMA) system. If the patient is discharged before the course is complete, arrangements should be made for the patient to receive these doses as an outpatient.

Step 3 – Prescribe on high risk infusion chart
For all patients, Venofer® doses should be prescribed on a high risk infusion chart.

- Venofer® should be given in 100ml of sodium chloride 0.9%.
- Only sodium chloride 0.9% should be used for flushing.
- No additional therapeutic agents should be added to the bag.
- Each Venofer® dose should be administered over 30 minutes.