

PATIENT INFORMATION SHEET

PLEASE COMPLETE THE FOLLOWING DETAILS:

Mr Mrs Miss Ms

SURNAME	
FIRST NAME	
ADDRESS	
TELEPHONE NO	Home: _____ Mobile: _____
DATE OF BIRTH	Age: _____
MEDICARE NO	Reference No: _____
EMERGENCY CONTACT	Name: Relationship: Contact Number:

HEALTH QUESTIONNAIRE (please tick YES or NO):

	YES	NO	If YES, please specify:
Are you on Dialysis?			
Are you taking any medications?			
Do you have Hyperthyroidism?			
Do you have Haemochromatosis/ Iron overload?			
Do you have known allergies to Ferric Carboxymaltose/known hypersensitivities to iron?			
Do you have any allergies?			
Do you have liver disease?			
Do you have any known medical conditions? (Such as diabetes, kidney disease or heart disease)			
Are you pregnant? Or trying to get pregnant?			
Do you have asthma or eczema?			
Are you suffering from fever/sepsis/inflamed tissues/ulcers/infection?			

Signature of patient: _____ **Date:** _____

Intravenous (IV) iron infusions

Information for patients, families and carers

This leaflet answers some common questions about IV iron infusions. It does not contain all available information and does not take the place of talking to your doctor about your case.

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 level drops 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 an **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

Your doctor should explain why you need IV iron and the other options.

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. 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 your doctor or infusion centre for advice. **If you have chest pain, trouble breathing, dizziness or neck / mouth swelling, please seek urgent medical attention / call an ambulance (000).**

Intravenous (IV) Iron Infusions (continued)

What to tell your Doctor

You need to tell your doctor and the centre doing your iron infusion if you:

- Are pregnant / trying to get pregnant. IV iron should be avoided in the first trimester.
- Have a history of asthma, eczema or other allergies.
- Have had a reaction to any type of iron injection or infusion in the past.
- Have a history of high iron levels, haemochromatosis or liver problems.
- Are on any medications (including herbal and over the counter medicines).
- Have (or may have) an infection at the moment.

What to ask your Doctor

You may wish to talk with your doctor about the following:

- Why do I need IV iron?
- What are the other options?
- About how long will the iron infusion take?
- How many iron infusions will I need to get enough iron?
- (If you are taking iron tablets at the moment), When do I stop taking iron tablets and will I need to use them again?
- How long will it take for the iron to work?
- Any questions about any side effects that may worry you (a general list is provided on the other side).

What happens on the day?

There is nothing special that you need to do to get ready for the day of iron infusion (eg. you don't need to fast). Unless you have an unexpected reaction, you will be able to drive home and do your normal activities. Before leaving the infusion centre, ensure that you have:

- > the number to contact if you have any worries or questions
- > the dates for any follow up tests and/or appointments

My IV Iron Infusion Details:

Name of iron:.....

Infusion date(s) / time(s):

.....

Location:

Contact phone number:

Date(s) of blood test or review after IV iron:.....

Notes:

.....

For more information:

Talk to your doctor / infusion centre

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*SA Health Safety and Quality Community Advisory Group (SQCAG).



Patient materials at:
www.sahealth.sa.gov.au/bloodorgantissue

FERINJECT (IRON) INFUSION CONSENT FORM

Informed Consent to Receive Intravenous Iron Replacement Therapy

I, the patient, understand that the administration of FERINJECT comes with the following risks, including but not limited to:

- Anaphylactic reaction, which in rare cases may be potentially fatal
- Paravenous leakage- leakage in FERINJECT injection site, potentially leading to long lasting skin discolouration
- Skin irritations
- Headache, muscle and joint pain
- Tachycardia and Hyper/Hypotension
- Nausea, Abdominal Pain, Constipation, Diarrhoea and Vomiting
- Minor reactions from FERINJECT may last up to 48 hours post injection. Some reactions start 1-2 days later, but usually settle after 2-3 days
- For full reactions see page 3

Understanding these risks, I give authority for staff at Direct Endoscopy to administer all necessary first aid and/or resuscitation measures, including alerting an Ambulance and my Emergency Contact, in the unlikely event that an adverse or anaphylactic reaction occurs.

In the event that an Ambulance is called, I consent to bearing all costs involved for ambulance transfer from Direct Endoscopy to the nearest Emergency Department and to accept any bill from Direct Endoscopy for Ambulance transfer.

As FERINJECT is **not suitable** for patients in some conditions, I declare that none of the below listed is applicable:

- Pregnancy in the first trimester
- Under the age of 18 years
- On Dialysis
- Allergy to Ferric Carboxymaltose/known hypersensitivities to iron
- Iron overload/Haemochromatosis
- Non-iron deficiency related anaemia
- Uncontrolled hyperthyroidism
- Suffering from fever/sepsis
- Inflamed Tissues/Ulcers/Infection
- Substance abuse
- Liver disease

I understand and acknowledge that this procedure involves insertion of an IV cannula and will require me to remain for 30 minutes after the procedure has been completed. Please allow 1.5 hours for this appointment.

*Continuation on next page

I acknowledge that I have had the opportunity to ask questions about the procedure and I am satisfied with the information I have received.

I understand that the procedure is undertaken entirely at my own risk and I am requesting medical intervention in the form of Intravenous Iron Infusion.

INFORMATION ABOUT FEES:

PENSIONER/HEALTH CARD HOLDERS: \$90 out-of-pocket (no rebate from Medicare)

STANDARD PATIENTS: \$120 out-of-pocket (no rebate from Medicare)

I hereby consent to this procedure and the costs of the procedure detailed above.

Patient Full Name:	
Date of Birth:	
Patient Signature:	
Date:	
Doctors Signature:	
Date:	

*Please go to next page for the full reactions list

FERINJECT (IRON) INFUSION CONSENT FORM- LIST OF FULL REACTIONS

Common Side Effects (Occurs in 1-10% of cases):

- Headache
- Flushing
- Nausea
- Low blood phosphate levels
- Injection/Infusion site reactions

Uncommon and Rare Side Effects (Occurs in <1% of cases)

- Hypersensitivity
- Numbness
- Increased heart rate
- Hypotension
- Taste disturbance
- Vomiting
- Dyspepsia
- Flatulence
- Abdominal pain
- Constipation
- Diarrhoea
- Itchiness
- Hives (urticaria)
- Redness (erythema)
- Rash
- Muscle pain or spasm
- Back, joint or chest pain
- Fever
- Fatigue
- Accumulation of fluid on periphery
- Pain and chills
- Anaphylaxis
- Rigors
- Malaise