



(iron sucrose)

VENOFER infusion orders

Patient Name

DOB

Phone

M

F

DIAGNOSIS Please provide ICD-10 code

Iron Deficiency Anemia

(other)

PRE-MEDICATION

Tylenol 1000mg PO

Diphenhydramine 25mg PO

Cetirizine 10mg PO

Solu-Medrol 125mg IVP

Solu-Cortef 100mg IVP

Diphenhydramine 25mg IVP

(other)

(other)

BENLYSTA ORDERS

DOSAGE	PATIENT WEIGHT
_____mg	lbs.
FREQUENCY	kg

NOTES

ORDERING PROVIDER

Signature X _____ Date

Provider

Phone

Fax