

**THERAPEUTIC PHLEBOTOMY (ADULT)
AMBULATORY PROGRAM ORDER SET**

As of January 2024

PATIENT INFORMATION

ALLERGIES NKA or _____

DIAGNOSIS

Hemochromatosis Polycythemia Vera Porphyria Cutanea Tarda
 Other: _____

LAB INVESTIGATIONS

Lab investigations to be drawn **prior to** each treatment or within 6 weeks of treatment
 CBC
 Ferritin
 Additional Labs: _____

THERAPEUTIC PHLEBOTOMY ORDERS

Order set is valid for 12 months from date of signature below

Standard volume for phlebotomy is 500mL as tolerated, however 250-500mL is an acceptable range

Phlebotomize _____ mL q _____ until ferritin less than 50ug/L 100ug/L or _____ ug/L
OR
 Phlebotomize _____ mL q _____ until hematocrit less than _____
 Discontinue treatment if adverse reactions occur and notify prescriber immediately
 Hold phlebotomy and notify prescriber if hemoglobin is less than 110g/L or _____ g/L
 Hold if ferritin is less than 50ug/L or _____

MAINTENANCE ORDERS (MANDATORY)

Once at target:
 Phlebotomize _____ mL q _____ to maintain ferritin less than _____ ug/L
OR
 Phlebotomize _____ mL q _____ to maintain hematocrit less than _____

MONITORING AND NURSING ACTIONS

Baseline HR, RR, and BP prior to initiation of procedure, immediately post procedure and PRN
 Phlebotomy can be initiated prior to same-day CBC results provided: previous hgb > 120g/L, vital signs are within normal limits, no signs of active bleeding, and no recent episodes of significant blood loss (outside of therapeutic phlebotomy)
 Monitor for signs of adverse reaction including: nausea, shortness of breath, chest pain, and orthostatic hypotension
 Review lab results prior to discharge – if CBC results are close to or below hold parameters, notify prescriber
 Other: _____

ORAL AND INTRAVENOUS REHYDRATION

Instruct patient in increase oral fluid and salt intake for 24 hours post phlebotomy
 0.9% NaCl _____ mL IV over _____ minutes for patients experiencing orthostatic hypotension

ADDITIONAL ORDERS

Date (yyyy/mm/dd):	Provider Name (please print):	Provider Signature:
Date: Time:	Transcriber Name (please print):	Transcriber Signature: