



REGIONAL PEDIATRIC PARENTERAL DRUG MONOGRAPH

GENERIC NAME

deferoxamine

Effective Date: Dec 2011	CLASSIFICATION Antidote for Iron Poisoning Iron Chelating Agent	OTHER NAMES Desferal Desferrioxamine	PAGE 1 of 2
Revised Date: Dec 2022			

ADMINISTRATION POLICY:

- IV Infusion – May be administered by a nurse
- IM Injection – May be administered by a nurse
- Subcut – May be administered by a nurse
- IV Bolus – *Not recommended*

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 500 mg vial, 2 gram vial

- Reconstitution 500 mg vial:** Add 2 mL sterile water for injection
Final volume: 2.3 mL Final concentration: 213 mg/mL
- 2 gram vial:** Add 8 mL sterile water for injection
Final volume: 9.4 mL Final concentration: 213 mg/mL

IV intermittent:

Dose	Diluent Volume
100 to 499 mg	25 mL
500 to 1000 mg	50 mL

IV Infusion: Pump Library:

Drug Library	Dose Rate	Short Name	Care Unit
Yes	mg/kg/h	def7560	Pediatric
Drug	Diluent	Final Volume (VTBI)	Final Concentration
7560 mg (36 mL of 213 mg/mL)	250 mL of NS	286 mL	26.43 mg/mL
Clinical Advisory:			
Soft Low Dose Limit: 15 mg/kg/h		Soft High Dose Limit: 15 mg/kg/h	Default 15 mg/kg/h

DOSAGE:

Acute Iron Intoxication:

IV Infusion: 15 mg/kg/hour titrate to response; maximum daily dose: 80 mg/kg/day and not to exceed 6 grams/day

IV Intermittent: Initial: 20 mg/kg (maximum dose: 1,000 mg/dose) administered no faster than 15 mg/kg/hour
followed by 10 mg/kg (maximum dose: 500 mg/dose) over 4-hour intervals for 2 doses; subsequent doses of 10 mg/kg (maximum dose: 500 mg/dose) over 4 to 12 hours may be repeated depending upon the clinical response; maximum daily dose: 6 grams/day

IM: Initially 90 mg/kg/dose x 1 dose then followed by 45 mg/kg/dose every 4 to 12 hours PRN; maximum daily dose: 6 grams/day



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<p>Chronic Iron Overload:</p> <p>IV Intermittent: 20 to 40 mg/kg/day over 8 to 12 hours 5 to 7 days per week; usual maximum daily dose: 40 mg/kg/day</p> <p>Subcut infusion: via a portable controlled device: 20 to 40 mg/kg/day over 8 to 12 hours 3 to 7 days per week; Maximum daily dose: 2000 mg/day</p> <p>Maximum rate : 15 mg/kg/hour</p>			
<p>STABILITY/COMPATIBILITY:</p> <p>Stability of reconstituted solution: 24 hours at room temperature</p> <p>Stability of Final Admixture: 24 hours at room temperature</p> <p>Compatibility: Compatible with normal saline, D5W, D10W, Lactated Ringer</p>			
<p>PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:</p> <ul style="list-style-type: none"> • Hypotension, tachycardia, flushing, urticaria (especially if given too rapidly), rash, anaphylaxis • Abdominal pain, diarrhea, nausea, vomiting • Prior to and during deferoxamine therapy, ensure that the intravascular volume is not depleted. Volume depletion during deferoxamine therapy has been associated with nephrotoxicity. 			
<p>ADDITIONAL NOTES AND NURSING CONSIDERATIONS:</p> <ul style="list-style-type: none"> • Several vials may be required dependant on availability • Rusty orange urine discoloration • Obtain baseline vital signs and monitor at 15 minutes then as clinically indicated • Monitor intake and output 			