



Therapeutic Phlebotomy Standard Orders

Patient Name:
DOB:
Address:
Phone No.:
PHIN:
MHSC:

PROCESS:

- 1. Initial appointment must be booked by referring Physician/Nurse Practitioner through Emergency Department reception at
2. Further appointments can be arranged by the patient. This standard order must be filed in Outpatient Department for future scheduled visits.

THERAPEUTIC PHLEBOTOMY ORDER:

- Remove 500 mls\* (standard volume)
Remove \_\_\_\_\_ mls\*
\*volumes collected are approximate

Diagnosis

- Polycythemia vera
Hemochromatosis
Pulmonary engorgement in acute pulmonary edema
(Diagnosis Required)

- One-time order
Multiple Phlebotomy Order. Frequency of Phlebotomy: \_\_\_\_\_ x \_\_\_\_\_ months

PATIENT CRITERIA

- Do not perform this procedure if the patient's HEMATOCRIT (HCT) is less than: \_\_\_\_\_
Do not perform this procedure if the patient's most recent FERRITIN is less than: \_\_\_\_\_

NOTE: Unless otherwise specified, procedure will not be performed if Hct is <33%.

LABORATORY TEST NOTE: Test results are not available until after the procedure.

ORDERED POST THERAPEUTIC PHLEBOTOMY

FREQUENCY

- CBC
FERRITIN
With each phlebotomy
With each phlebotomy

I have evaluated this patient, am aware of no contraindications to this procedure, have explained the reason for this procedure to the patient, and will be responsible for this patient's follow-up care.

Prescriber Signature
Date:
Prescriber Name (Print)
Prescriber's Phone No:
Expiry Date:

A new standard order form must be completed at minimum every year by the prescriber.