

Iron Therapy

Iron supplementation is usually started when full enteral feedings are tolerated and at a recommended dose of 2-4 mg/kg/day. **Iron therapy may be started as early as DOL #8 and not later than 4 weeks of age.** The goal is to have iron therapy started by 2 weeks of age. Obtain hematocrit and reticulocyte count around 4 weeks of age, or sooner if clinically indicated.

Iron is infrequently associated with oxidative stress induced hemolysis. If there is evidence of hemolysis:

- Stop iron therapy while evaluating etiology
- Review blood type and DAT
- Transfuse as required, but send screening labs (if desired) prior to transfusion therapy
- Check state screen results

Sending the following labs should be considered after consultation with the rounding Neonatologist:

- Send Heinz body prep, blood smear, hgb electrophoresis, and Vitamin E level
- Consider sending G6PD, PK, and osmotic fragility testing
- Consider a hematology consult

See separate guidelines for Hospital & Discharge Vitamin and Iron Supplementation Recommendations.