

IV IRON INFUSION

WellSouth has a suite of Primary Options for Care (POC). POC are designed to either prevent a hospital admission or offer the patient a service which is normally provided in a hospital, at a General Practice. This may be at the patients usual General Practice or at another nearby practice.

Patients who meet the criteria for IV Iron infusion as per the relevant Southern Health Pathway (IV Iron Infusion) may be managed in Primary Care. For more information visit [Health Pathways](#)

Eligibility:

- Symptomatic Iron Deficiency
- Maternity: Trimester 2 or 3 only
- Chronic Heart Failure
- Inflammatory Bowel Disease
- Chronic Kidney Disease
- Postpartum

****Please see Appendix for detailed criteria***

Also eligible are patients who have already had an IV Iron Infusion within the last 3 months and need to have a 2nd infusion because a dose of >1000mg is required **or** on consultant advice*.

****This must be clearly documented in the portal and include the name of consultant.***

Exclusions:

- Maternity: Trimester 1

Claiming

- Claiming is via the WellSouth PHN portal

POAC - Primary Options for Acute Care	New IV Antibiotics Therapy Consult
	New Cellulitis Follow-Up
	New IV Fluids Claim
	New Urinary Catheterisation
	New IV Iron Infusion Claim

- Service codes for your PMS— please set these up prior to using the programme

Code	Amount	Description
WPPIII	\$143.75	IV IRON

- Programme payment rates are:
\$125 +GST
(This includes consumables, please do not on charge the patient)

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Appendix:
Extension to IV Iron Programme—Criteria Breakdown

Symptomatic Iron Deficiency

Presenting concern

Symptomatic Iron Deficiency

Symptomatic Iron Deficiency:

- Diagnosed symptomatic iron deficiency anaemia AND
- Ferritin < 20ug/L (or Ferritin < 50ug/L if the CRP is > 5mg/L) AND
- Failure of 3-month trial of oral iron therapy

Chronic Heart Failure

Presenting concern

Chronic Heart Failure

Chronic Heart failure with reduced ejection fraction and:

- Ferritin < 100ug/L
OR
- Ferritin 100 – 300ug/L with transferrin saturation < 20%

Inflammatory Bowel Disease

Presenting concern

Inflammatory Bowel Disease

Inflammatory Bowel Disease with:

- Ferritin < 100ug/L
OR
- Transferrin saturation < 16%

Chronic Kidney Disease

Presenting concern

Chronic Kidney Disease

Chronic Kidney Disease

- Anaemia of inflammation or functional iron deficiency with
- Hb < 100g /L and
- Ferritin > 20ug/L

Or on consultant recommendation only

Maternity (Trimester 2 & 3 only)

Presenting concern

Maternity - Trimester 2 or 3

Maternity Trimester 2 or 3 – must have:

- Hb < 100g/L
 - Ferritin < 20ug/L (or Ferritin < 50ug/L if the CRP is > 5mg/L) with other deficiencies excluded or corrected
AND
 - At least 1 of the following:
 - Fetal compromise
 - Failure of 6-8 week trial of oral iron therapy due to persistent anaemia (< 10g/L rise in Hb and ferritin remains low), side effects or high iron requirements
 - 36 weeks or more gestation
- OR
- Severe iron deficiency anaemia with both of the following:
- Hb < 85g/L
 - Ferritin < 20ug/L (or Ferritin < 50ug/L if the CRP is > 5mg/L) with other deficiencies excluded or corrected

Postpartum

Presenting concern

Postpartum

Postpartum

- Must be haemodynamically stable
AND
- Hb < 85g/L with or without previous blood transfusion