

Content Focus: Administration

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Your ScoreCard: Correct: 11/12 Incorrect: 1/12

What administration considerations apply to epoetin?

Obtain baseline blood pressure, CBC, Hgb, BUN, uric acid, phosphorus, potassium, creatinine, transferrin saturation, and ferritin concentration and monitor periodically; for HIV, obtain an erythropoietin level.

Make sure to control blood pressure for clients with chronic renal failure prior to starting drug therapy.

Administer IV or subcutaneously three times a week, or once a week with some types of chemotherapy.

Do not shake vials or mix with other drugs.

Use each vial for one dose only.

Check Hgb twice per week until adequate and then periodically.

Report Hgb that rises above 12 g/dL or increases more than 1g/dL within 2 weeks; for cancer clients, report Hgb that rises to 10 g/dL.

Monitor iron level and maintain it within the expected range, as adequate quantities of iron, folic acid, and vitamin B12 are essential for RBC growth.