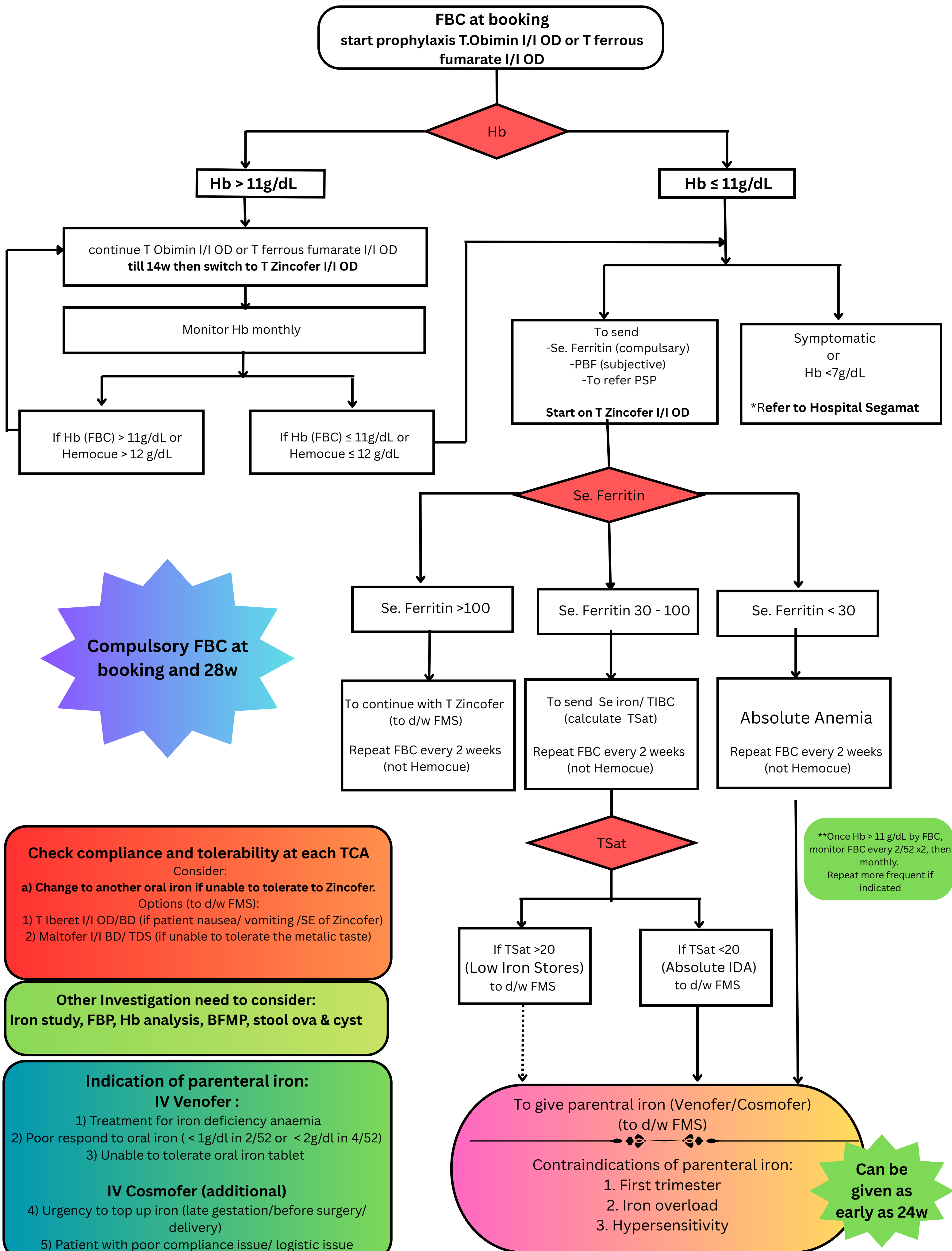


# FLOWCHART FOR MANAGEMENT OF ANEMIA AMONG PREGNANT MOTHERS IN KLINIK KESIHATAN & KKIA IN SEGAMAT



**Check compliance and tolerability at each TCA**  
Consider:  
a) Change to another oral iron if unable to tolerate to Zincofer.  
Options (to d/w FMS):  
1) T Iberet I/I OD/BD (if patient nausea/ vomiting /SE of Zincofer)  
2) Maltofer I/I BD/ TDS (if unable to tolerate the metallic taste)

**Other Investigation need to consider:**  
Iron study, FBP, Hb analysis, BFMP, stool ova & cyst

**Indication of parenteral iron:**  
**IV Venofer :**  
1) Treatment for iron deficiency anaemia  
2) Poor respond to oral iron (< 1g/dl in 2/52 or < 2g/dl in 4/52)  
3) Unable to tolerate oral iron tablet  
**IV Cosmofer (additional)**  
4) Urgency to top up iron (late gestation/before surgery/ delivery)  
5) Patient with poor compliance issue/ logistic issue

\*\*Once Hb > 11 g/dL by FBC, monitor FBC every 2/52 x2, then monthly. Repeat more frequent if indicated

Can be given as early as 24w