Referral pathway for Anaemia realted to CKD

**Anaemia in association with CKD**

**Hb <110 and eGFR <30**

**NOTE: Hb target for Epo 110-120**

**Ferritin target in CKD 300**

**T sats target >20**

**Ferritin >300**

**T sats >20**

**Liaise with nephrology ? need Epo**

**Ferritin <50**

**Start oral Iron**

**Replace B12/folate as necessary**

**Monitor Hb**

**Ferritin <300 but >50 Or Tsat <20**

**Liaise with Nephrology re Intravenous Iron**

**NOTE: patient may not require review**

**HB remains <110**

**Exclude other causes of Anaemia**

**Investigate for GI blood loss**

**FBC, U&E, CRP, Ferritin, B12, Folate, Transferrin saturation and Serum iron**