

iron administration is required because of the risk of anaphylaxis, so a test dose is recommended before use. Several IV iron preparations (e.g., ferumoxytol, ferric carboxymaltose, iron sucrose complex, iron isomaltoside) show promise in complete replacement of iron with little toxicity ([Auerbach, 2011](#); [Bregman and Goodnough, 2014](#); [Smith, 2012](#)).

Diet

A primary nursing objective is to prevent nutritional anemia through family education. The nurse must reinforce the importance of administering iron supplementation to exclusively breastfed infants by 4 months of age because breast milk is a low iron source ([Baker, Greer, and Committee on Nutrition American Academy of Pediatrics, 2010](#); [Lokeshwar, Mehta, Mehta, et al, 2011](#); [Ziegler, Nelson, and Jeter, 2011](#)). The American Academy of Pediatrics recommends that preterm, marginally low and low-birth-weight infants, or infants with inadequate iron stores at birth receive iron supplements at approximately 2 months old ([Berglund, Westrup, and Domellof, 2010](#)).

In formula-fed infants, the nurse discusses with parents the importance of using iron-fortified formula and of introducing solid foods at the appropriate age during the first year of life. Traditionally, cereals are one of the first semisolid foods to be introduced into the infant's diet at approximately 6 months old ([Baker, Greer, and Committee on Nutrition American Academy of Pediatrics, 2010](#); [Lerner and Sills, 2011](#); [Lokeshwar, Mehta, Mehta, et al, 2011](#)). The best solid-food source of iron is commercial iron-fortified cereals. It may be difficult at first to teach the infant to accept foods other than milk. The same principles are applied as those for introducing new foods (see Nutrition, [Chapter 7](#)), especially feeding the solid food before the milk. Predominantly milk-fed infants rebel against solid foods, and parents are cautioned about this and the need to be firm in not relinquishing control to the child. It may require intense problem solving on the part of both the family and the nurse to overcome the child's resistance.

A difficulty encountered in discouraging the parents from feeding milk to the exclusion of other foods is dispelling the popular myth that milk is a "perfect food." Many parents believe that milk is best for infants and equate weight gain with