pediatric associates
of austin, p.a.

Anemia Testing

What Is Iron Deficiency Anemia — and Why Does It Happen?

- Iron deficiency anemia occurs when the body does not have enough iron to make healthy red blood cells.
- Iron is needed to carry oxygen throughout the body. When levels are low, this can lead to fatigue and other symptoms.
- This is common in children and teens and is often related to dietary intake or blood loss (such as menstrual cycles).

When and How Do We Check for Anemia?

- At well visits, your child's provider reviews risk factors for anemia, including diet, growth, and (in teens) menstrual history.
- Based on the American Academy of Pediatrics periodicity schedule, anemia screening is most commonly performed:
    - Around 12 months of age
    - During adolescence, especially for menstruating teens or those with risk factors
- In infants, testing is typically done with a finger-stick (capillary) hemoglobin or CBC. If results are low or borderline, additional labs may be recommended.
- In teens, a more in depth lab panel may be ordered and testing is done via venipuncture.

What Symptoms Can Occur?

Many children and teens have mild symptoms or none at all. When present, symptoms may include:

- Fatigue or low energy
- Pale skin
- Headaches
- Dizziness
- Trouble concentrating
- Shortness of breath with activity

Why Might Iron Levels Be Low?

Common causes include:

- **Diet low in iron-rich foods.** Animal sources are more easily absorbed and include beef, chicken and turkey, fish (tuna and salmon), and eggs. Plant-based sources include beans and lentils, tofu, spinach and leafy greens, iron-fortified cereals and oatmeal, and nuts and seeds (pumpkin seeds, cashews). Kids Eat In Color has some great tips for infants and toddlers.
- In those **over 12 months, drinking too much milk** (more than ~16–24 oz/day), can crowd out iron-rich foods and interfere with iron absorption.
- **For teen girls, blood loss from menstrual cycles** is a common cause
- Increased needs during growth
- High levels of physical activity

1600 West 38th St · Suite 100 · Austin, TX 78731 (512) 458-5323 · Fax: (512) 458-2030
References: American Academy of Pediatrics, Healthy Children.org, childrenshospital.org

What Is the Treatment?

Increasing daily iron intake is the treatment. This can occur by eating more iron-rich foods, if possible and/or starting oral iron supplementation.

How Much Iron Does Your Child Need?

Age	Iron Requirement
Infants (0-6 months)	0.3 mg Iron/day
Infants (6-12 months)	11 mg Iron/day
Children (1-12 years)	7-10 mg Iron/day
Adolescent Boys	11 mg Iron/day
Adolescent Girls	15 mg Iron/day

Food Source	Mg/Serving	Food Source	Mg/Serving
Raisin Bran (½ cup)	12.0	Beef (3 oz)	3.0
Total Cereal (½ cup)	9.0	Black Beans (½ cup)	1.8
Cooked Oatmeal (½ cup)	5.0	Tuna (3/4 cup)	1.8
Soybeans (½ cup)	4.4	Dark Chicken (3.5 oz)	1.7
*Sunflower Seeds (¼ cup)	4.0	Raisins (½ cup)	1.5
Lean Hamburger (1 patty)	3.9	Peas (½ cup)	1.4
Molasses (1 Tbsp.)	3.5	*Hard-boiled Egg	1.1
Tofu (½ cup)	3.4	Whole Wheat Bread (1 slice)	0.9
Cooked Lentils (½ cup)	3.3	Broccoli (½ cup)	0.6
Cheerios (½ cup)	3.2	*Peanut Butter (2 Tbsp)	0.6

https://www.childrenshospital.org/

Iron Supplement Specifics

If oral iron supplementation is needed:

- Your provider will discuss the strength and duration needed.
- Treatment typically lasts **at least 3 months, and often longer**.
- We monitor blood levels periodically to ensure iron levels normalize.

How to take iron:

- Can take with food if stomach upset occurs
- **Best absorbed with vitamin C** (citrus fruits, strawberries, bell peppers, orange juice).
- **Avoid taking with calcium**-containing foods (milk, dairy)
- **Choose 3rd party verified supplement (look for USP, NSF, Clean Label Project certification).** Common 3rd party verified brands include Nature Made, Kirkland Signature, Metagenics, Nordic Naturals, Thorne. **For infants and toddlers, we've found the best tolerated supplement is NovaFerrum Yummy | Pediatric Drops Liquid Iron Supplement (**NovaFerrum on Amazon**)**

Side effects and medication interactions:

- **Possible side effects**: constipation, dark stools, and mild stomach upset. If constipation occurs increase fiber in diet and consider daily Miralax if needed
- **Medication interactions**: Antacids or acid-reducing medications may reduce absorption. Certain antibiotics: may need to be spaced apart from iron

---

1600 West 38th St · Suite 100 · Austin, TX 78731 (512) 458-5323 · Fax: (512) 458-2030
References: American Academy of Pediatrics, Healthy Children.org, childrenshospital.org