



CREE HEALTH BOARD MEDICAL ORDERS

TOCOLYSIS PROTOCOL

ALLERGIES: _____

| Date and Time | TOCOLYSIS WITH NIFEDIPINE (ADALAT) | Nursing Notes |
|---------------|---|---------------|
| | Admit to Medicine | |
| | Dx: <i>Contractions/pre-term labor</i> | |
| | <input type="checkbox"/> One-on-one nursing (service prive) | |
| | Diet: NPO while contracting | |
| | | |
| | Vitals: <input type="checkbox"/> Full vitals q 4 hours | |
| | <input type="checkbox"/> BP and pulse before and after each nifedipine dose | |
| | <input type="checkbox"/> BP and pulse q 15 mins after first nifedipine dose x 3 hours and then q 1 hour | |
| | <input type="checkbox"/> Advise MD if systolic BP < _____ mmHg | |
| | <input type="checkbox"/> Advise MD if diastolic BP < 40 mmHg | |
| | | |
| | Activity: <input type="checkbox"/> Bedrest | |
| | | |
| | IV: <input type="checkbox"/> #18 intravenous access x 1 | |
| | <input type="checkbox"/> Ringers's lactate 500 cc over 30 mins as bolus | |
| | <input type="checkbox"/> Ringer's lactate at 120 cc/hour after bolus | |
| | | |
| | Fetal monitoring: <input type="checkbox"/> Continuous fetal monitoring | |
| | <input type="checkbox"/> Intermittent auscultation if monitor not available (see full guideline or Appendix A for summary) | |
| | Medications: | |
| | <u>Initial dose</u> ** NOT sublingual, NOT to chew or crush ** | |
| | <input type="checkbox"/> Nifedipine 20 mg po x 1 | |
| | <input type="checkbox"/> Repeat nifedipine 10 mg po q 20 mins x 2 doses if still contracting after the first dose (maximum 40 mg in first 60 minutes) | |
| | <u>Maintenance dose</u> (if contractions have stopped after initial dose) | |
| | <input type="checkbox"/> Nifedipine 20 mg po q 8 hours x 24 hours | |
| | | |
| | Labs, if available: <input type="checkbox"/> CBC, lytes, creat, BUN, glu, U/A and urine culture | |
| | <input type="checkbox"/> Blood group and x-match x _____ units | |
| | | |
| | <i>Note: Nifedipine cannot be used concomitantly with magnesium sulfate</i> | |