

Allergies: _____

Induction & Augmentation of Labour - Oxytocin

Diet

Regular diet Other Diet: _____

Vitals/Monitoring

- Obtain baseline Non-Stress Test
- Document time of initiation of oxytocin, time of dosage increases & effects of oxytocin infusion
- Maternal HR, BP q15 – 30 minutes & with any change in infusion rate
- Continuous fetal heart rate – document frequency, duration & quality of contractions q15 mins & with any change in infusion rate
- Monitor and document intake and output

IV Therapy

Oxytocin infusion to be administered on a separate pump – can be connected at hub or via y-site only

_____ mL/h

Oxytocin Infusion

This concentration (60 milliunits/mL) allows for dosing increments of 1 milliunit/min to equal 1 mL/hour

Oxytocin 30 units in 500 mL of Ringers Lactate Mixed by: _____ Consignor: _____

Recommended starting dose is 2 milliunits/minute = 2 mL/h

OR

Start Oxytocin at 1 milliunit/minute = 1 mL/h

Increase oxytocin IV infusion by 1 – 2 milliunits/minute = increase of 1 – 2 mL/h q30 minutes until:

- contractions are in a regular pattern
- are at least every 2 – 5 minutes apart
- last at least 60 seconds
- have a spacing of at least 60 seconds in between the end of one contraction and the beginning of another

Once 20 milliunits/minute (20 mL/hour) has been reached, re-evaluate the progress of the patient with the MRP in charge

Stop infusion, turn patient on to left side, increase IV rate, apply O2 and call MRP if any of the following apply:

- contractions are hypertonic
- atypical or abnormal fetal heart rate
- change in maternal BP of greater than 15 mmHg for systolic/diastolic
- maternal palpitations

Consult with MRP before restarting oxytocin infusion

Additional Orders

Practitioner Signature: _____ Date: _____ Time: _____

Transcribed by: _____ Date: _____ Time: _____

Verified by: _____ Date: _____ Time: _____