

LDR Pre-Term Labor (Procardia) Orders

Directions: 1. Indicate choice when options are available by placing a check in the box
 2. Mark through entire line any prechecked item you do not wish to order mark through

Attending Physician: _____ Diagnosis: _____

Observation Status Admission for Inpatient Care Admit or transfer to: _____ Unit

ALLERGIES: NKA **ALLERGIC to:** _____

VITAL SIGNS:

- Vital signs on admission
- Vital signs every 30 minutes if pregnancy induced hypertension
- Monitor vital signs before each dose of **Procardia**. Hold dose if systolic BP is less than 90 mmHg

ACTIVITY:

- Bedrest with bathroom priviledges

DIET:

- NPO except for ice chips

IV SOLUTIONS:

- Lactated Ringer's IV infuse one (1) liter bolus; THEN
- Lactated Ringer's IV infuse at 150 ml/hour

MEDICATIONS:

- Betamethasone (Celestone)** 12 mg IM; THEN
- Betamethasone (Celestone)** 12 mg IM repeat in 12 hours
- Betamethasone (Celestone)** 12 mg IM repeat in 24 hours
- Loading dose: **nifedipine (Procardia)** 10 mg PO every 20 minutes x 4 doses total (not to exceed 40 mg) (omit for systolic BP less than 90 mmHg)
- Maintenance dose: **nifedipine (Procardia)** 10 mg PO every 4 hours (omit for systolic BP less than 90 mmHg); OR
- Maintenance dose: **nifedipine (Procardia)** 20 mg PO every 8 hours (omit for systolic BP less than 90 mmHg)
- Hydroxyzine pamoate (Vistaril)** 100 mg PO PRN at bedtime for rest
- Zolpidem (Ambien)** 10 mg PO PRN at bedtime for rest
- Ondansetron (Zofran)** 4 mg IV every 4 hours PRN for nausea

PATIENT CARE:

- External fetal monitoring
- Sequential compression devices to lower extremities until patient is ambulatory

LABORATORY:

- CBC with Differential stat
- Urinalysis, clean catch
- Urinalysis, catheterized
- GBS (group B streptococcus) cervical culture
- Gen Probe culture
- Wet Prep (KOH) cervical culture

ADDITIONAL ORDERS:

Physician _____ Pager _____ Date ____/____/____ Time: _____

Verbal Order Verification Signature _____ Date ____/____/____ Time: _____