

| Date | Time | DRUG ALLERGY / SENSITIVITY | | | | | | | |
|----------------------|--------|----------------------------|------------------|-------------------|------------|-------------------|--------------------|-------|-----------------|
| | | 1 | 2 | | 3 | | | | |
| | | 3 | 4 | | | | | | |
| UNSAFE ABBREVIATIONS | | | | | | | | | |
| DO NOT USE | U or u | .1 mg | .10 mg or 1.0 mg | ug | MS or MSO4 | MgSO4 | IU | QD | QOD |
| USE | Units | 0.1 mg | 0.1 mg or 1 mg | mcg or micrograms | Morphine | Magnesium Sulfate | International Unit | Daily | Every other day |

INDUCTION / AUGMENTATION OF LABOR ORDERS (VIABLE FETUS)

Orders preceded by a will be initiated only if checked. All others will be initiated unless deleted by a single line.

1. Labor Augmentation Labor Induction

Indication: _____

- Gestational Age: _____ weeks Amnio Results _____
- Estimated Fetal Size: _____ SGA AGA LGA
- Adequate Pelvis: Yes No
- Presenting Part: Vertex Unable to determine
- Bishop's Score*: _____ (circle elements below included in score). *For Induction Only

| Score | Dilation (cm) | Effacement (%) | Station** | Cervical Consistency | Position of Cervix |
|-------|---------------|----------------|-----------|----------------------|--------------------|
| 0 | Closed | 0 – 30 | -3 | Firm | Posterior |
| 1 | 1 – 2 | 40 - 50 | -2 | Medium | Mid position |
| 2 | 3 – 4 | 60 – 70 | -1, 0 | Soft | Anterior |
| 3 | 5 – 6 | 80 | +1, +2 | --- | --- |

** Station reflects -3 to +3 scale (Favorable = score 8 or greater)

2. Nursing Care:

- Prior to initiating dinoprostone (Cervidil), misoprostol (Cytotec), or oxytocin (Pitocin):
 - Perform a cervical exam • Evaluate Fetal Heart Rate (FHR) to establish reassuring pattern
- If tachysystole with non- reassuring FHR is present:
 - Discontinue Pitocin • Initiate intrauterine resuscitation
 - Notify MD/CNM
- If tachysystole with reassuring FHR is present:
 - Notify MD/CNM

(Tachysystole is defined as more than 5 contractions in a 10 minute time period averaged over a 30 minute window)

3. Medications:

- Ambien 10 mg po q hs for rest**
- Stadol 2 mg and Phenergan 12.5 mg IV prn for sleep x 1 dose**
- Dinoprostone (Cervidil) 10 mg in posterior fornix of vagina x 1**
 - Remove Cervidil 12 hrs after insertion or as ordered by MD/CNM
 - Remove Cervidil for hyperstimulation and/or non-reassuring FHR
- Misoprostol (Cytotec) 25 mcg tablet in posterior fornix of vagina**
- Misoprostol (Cytotec) 25 mcg tablet po**
 - Repeat every ____ hours prn
 - Hold redosing and notify MD/CNM if:
 - The FHR is non-reassuring • Adequate cervical ripening is achieved (Bishop Score 8 or greater)
 - Active labor (4 or more contractions in 10 minutes) • Rupture of membranes
- Oxytocin (Pitocin) 30 units in 500 ml Lactated Ringers IV piggy back**
 - Pitocin should not be administered within ____ hours of last dose of Cytotec
 - Do not exceed ____ milliunits/minute
- Low Dose:** Begin Pitocin as 1-2 milliunits/minute (1-2 ml/hr) via infusion pump and may increase by 1-2 milliunits no more often than every 30 minutes until adequate contraction pattern is reached.
- High Dose:** Begin Pitocin at 2-4 milliunits/minute (2-4 ml/hour) via infusion pump and may increase by 2-4 milliunits no more often than every 30 minutes until adequate contraction pattern is reached.
- Verbal/telephone orders read back and verified.

MD/CNM _____ Date/Time _____ RN _____ Date /Time _____ faxed time & initial _____