

Nursing

Nursing

[X] Vital signs - T/P/R/BP	Routine, Per unit protocol Per Epidural Protocol, L&D Pre-Delivery
[X] Maintain IV access	Routine, Until discontinued, Starting S Maintain IV access for 4 hours after infusion discontinued unless otherwise specified, L&D Pre-Delivery
[X] Notify Anesthesia	Routine, Until discontinued, Starting S, STOP infusion and call Anesthesia for: 1) Respirations less than 10 per minute 2) Confusion, disorientation, visual disturbances 3) Ringing in the ears, metallic taste in mouth 4) Excessive motor block of lower extremities, L&D Pre-Delivery
[X] Notify Anesthesia	Routine, Until discontinued, Starting S, If respirations are less than 8 per minute, STOP infusion and call Anesthesia STAT. Administer naloxone (Narcan) 0.1 milligram IV then every one minute as needed up to 0.4 milligrams IV. If needed, start nasal cannula at 2 liters per minute to keep O2 saturation above 95%., L&D Pre-Delivery

Nursing - HMSL Only

[X] Vital signs - T/P/R/BP	Routine, Per unit protocol Per Epidural Protocol, L&D Pre-Delivery
[X] Maintain IV access	Routine, Until discontinued, Starting S Large bore IV preferred. Maintain IV access for 4 hours after infusion discontinued unless otherwise specified, L&D Pre-Delivery
[X] Epidural Set Up	Routine, Until discontinued, Starting S See nursing protocol on how to prepare for epidural insertion by anesthesia, L&D Pre-Delivery
[X] Epidural symptomatic hypotension interventions	Routine, Until discontinued, Starting S -For symptomatic hypotension while epidural is in place (a decrease in blood pressure greater than 30 mmHg with or without associated symptoms), reposition patient to improve uterine blood flow, administer a fluid bolus of 500 ml of lactated Ringer's, administer ephedrine as specified, and notify the anesthesiologist. Evaluate blood pressure immediately for symptoms of hypertension which may include maternal nausea, maternal change in level of consciousness, and/or decrease in fetal heart rate., L&D Pre-Delivery
[X] Notify Anesthesia	Routine, Until discontinued, Starting S, STOP infusion and notify Anesthesia for: 1) Respirations less than 10 per minute 2) Confusion, disorientation, visual disturbances 3) Ringing in the ears, metallic taste in mouth 4) Excessive motor block of lower extremities, L&D Pre-Delivery
[X] Notify Anesthesia	Routine, Until discontinued, Starting S, If respirations are less than 8 per minute, STOP infusion and notify Anesthesia STAT. Administer naloxone (Narcan) 0.1 milligram IV then every one minute as needed up to 0.4 milligrams IV. If needed, start nasal cannula at 2 liters per minute to keep O2 saturation above 95%., L&D Pre-Delivery
[X] Notify Anesthesia	Routine, Until discontinued, Starting S, NOTIFY ANESTHESIA PRIOR TO ADMINISTRATION OF ANY NARCOTICS, SEDATIVES OR ANTIEMETICS OTHER THAN THOSE ORDERED BY ANESTHESIA, L&D Pre-Delivery

IV Fluids

IV Fluids - HMSL, HMWB, HMTW Only

[X] lactated ringers bolus - For Preparation of Epidural Insertion	1,000 mL, intravenous, Administer over: 60 Minutes, once, For 1 Doses, L&D Pre-Delivery As preparation for epidural insertion initiate a fluid bolus of 1000 mL. Start the fluid bolus before calling the anesthesiologist for epidural placement.
[X] lactated ringers bolus ONCE PRN - If a C-Section is called	1,000 mL, intravenous, Administer over: 60 Minutes, once PRN, If a C-Section is called, L&D Pre-Delivery If a C section is called initiate another IV fluid bolus of 1000 mL Lactated Ringers as preparation for the C section.
[X] lactated ringers bolus ONCE PRN - For Symptomatic Hypotension	1,000 mL, intravenous, Administer over: 15 Minutes, once PRN, Symptomatic Hypotension, L&D Pre-Delivery Give if drop in BP is GREATER than 30 mmHg, change in maternal level of consciousness, change in fetal heart pattern. Notify anesthesia if administered. May use pressure bags for bolus.

Medications

Epidural infusions - HMMH, HMW, HMB, HMSL, HMCL Only (Single Response)

(X) ropivacaine (PF) 0.2% + fentanyl 2 mcg/mL epidural solution	epidural, continuous, L&D Pre-Delivery Continuous Rate (mL/hr): 8 ml/hr PCEA Dose (mL): 4 mL PCEA lock (Minutes): 20 Minutes One Hour Limit (mL): 20 mL
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Epidural Infusions - HMWB, HMTW (Single Response)

(X) ropivacaine (PF) 0.2% + fentanyl 2 mcg/mL epidural solution	epidural, continuous, L&D Pre-Delivery Continuous Rate (mL/hr): 0 ml/hr PCEA Dose (mL): Other Specify: 6 mL PCEA lock (Minutes): 30 Minutes One Hour Limit (mL): 26 mL Intermittent Bolus PIB (mL): 8 mL Intermittent Bolus Administer Over: 45 min
() ropivacaine (PF) 0.2% epidural solution for CADD	epidural, continuous, L&D Pre-Delivery Continuous Rate (mL/hr): 0 ml/hr PCEA Dose (mL): Other Specify: 6 mL PCEA lock (Minutes): Other Specify: 30 minutes One Hour Limit (mL): Other Specify: 26 mL Intermittent Bolus PIB (mL): 8 mL Intermittent Bolus Administer Over: 45 min

PRN Medications - NOT HMSL, HMWB, HMTW

[X] naloxone (NARCAN) 0.4 mg/mL injection	0.1 mg, intravenous, every 1 min PRN, opioid reversal, respiratory depression, For 4 Doses, L&D Pre-Delivery
[X] diphenhydrAMINE (BENADRYL) injection	12.5 mg, intravenous, every 2 hour PRN, itching, L&D Pre-Delivery

PRN Medications - HMWB, HMTW Only

[X] fentaNYL (SUBLIMAZE) injection	100 mcg, epidural, once PRN, severe pain (score 7-10), For Initial Epidural Bolus, L&D Pre-Delivery to be immediately available for initial epidural bolus by the anesthesiologist. Allowance for Patient Preference:
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[X] bupivacaine (PF) (MARCAINE) 0.25 % solution	10 mL, epidural, once, For 1 Doses, L&D Pre-Delivery to be immediately available for initial epidural bolus by the anesthesiologist.
[X] bupivacaine (PF) (MARCAINE) 0.5 % (5 mg/mL) injection	epidural, once, For 1 Doses, L&D Pre-Delivery to be immediately available for initial epidural bolus by the anesthesiologist.
[X] lidocaine (PF) (XYLOCAINE) 20 mg/mL (2 %) injection	injection, once, For 1 Doses, L&D Pre-Delivery to be immediately available for initial epidural bolus by the anesthesiologist.
[X] naloxone (NARCAN) 0.4 mg/mL injection	0.1 mg, intravenous, every 1 min PRN, opioid reversal, respiratory depression, For 4 Doses, L&D Pre-Delivery
[X] diphenhydrAMINE (BENADRYL) injection	12.5 mg, intravenous, every 2 hour PRN, itching, L&D Pre-Delivery
[X] epHEDrine sulfate injection	10 mg, intravenous, every 5 min PRN, For Symptomatic Hypotension, For 3 Doses, L&D Pre-Delivery Administer slow IV Push every 5 minutes as needed for Symptomatic Hypotension up to 3 doses.

PRN Medications - HMSL Only

[X] fentaNYL (SUBLIMAZE) injection	100 mcg, intravenous, once PRN, severe pain (score 7-10), For Initial Epidural Bolus, L&D Pre-Delivery to be immediately available for initial epidural bolus by the anesthesiologist. Allowance for Patient Preference:
[X] bupivacaine (PF) (MARCAINE) 0.25 % solution	10 mL, epidural, once, For 1 Doses, L&D Pre-Delivery to be immediately available for initial epidural bolus by the anesthesiologist.
[X] naloxone (NARCAN) 0.4 mg/mL injection	0.1 mg, intravenous, every 1 min PRN, opioid reversal, respiratory depression, For 4 Doses, L&D Pre-Delivery
[X] diphenhydrAMINE (BENADRYL) injection	12.5 mg, intravenous, every 2 hour PRN, itching, L&D Pre-Delivery
[X] epHEDrine injection	5 mg, intravenous, every 5 min PRN, For Symptomatic Hypotension, For 3 Doses, L&D Pre-Delivery Administer slow IV Push every 5 minutes as needed for Symptomatic Hypotension up to 3 doses.

Antiemetic - NOT HMSL

[X] ondansetron (ZOFTRAN) IV	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery
[X] promethazine (PHENERGAN) IV	12.5 mg, intravenous, every 4 hours PRN, nausea, vomiting, L&D Pre-Delivery
[] famotidine (PEPCID) injection	20 mg, intravenous, once PRN, To be given prior to C/S, For 1 Doses, L&D Pre-Delivery Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:
[] sodium citrate-citric acid (BICITRA) solution	30 mL, oral, once PRN, To be given prior to C/S, For 1 Doses, L&D Pre-Delivery
[] scopolamine (TRANSDERM-SCOP) 1.5 mg patch (1 mg over 3 days)	1 patch, transdermal, Administer over: 72 Hours, once PRN, To be given prior to C/S, For 1 Doses, L&D Pre-Delivery

Antiemetic - HMSL Only

[X] ondansetron (ZOFTRAN) IV	4 mg, intravenous, every 8 hours PRN, nausea, vomiting, L&D Pre-Delivery
[X] promethazine (PHENERGAN) IV	12.5 mg, intravenous, every 4 hours PRN, nausea, vomiting, L&D Pre-Delivery
[X] famotidine (PEPCID) injection	20 mg, intravenous, once PRN, To be given prior to C/S, For 1 Doses, L&D Pre-Delivery Per Med Staff Policy, R.Ph. will automatically switch IV to equivalent PO dose when above approved criteria are satisfied:

[X] sodium citrate-citric acid (BICITRA) solution	30 mL, oral, once PRN, To be given prior to C/S, For 1 Doses, L&D Pre-Delivery
[] scopolamine (TRANSDERM-SCOP) 1.5 mg patch (1 mg over 3 days)	1 patch, transdermal, Administer over: 72 Hours, once PRN, To be given prior to C/S, For 1 Doses, L&D Pre-Delivery

Respiratory

Respiratory

[X] Oxygen therapy	Routine, As needed Device: Nasal Cannula Rate in liters per minute: Rate in tenths of a liter per minute: O2 %: Titrate to keep O2 Sat Above: 95% Indications for O2 therapy: Other Specify: If respirations are less than 8 per minute L&D Pre-Delivery
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