**Unique Plan Description: OB Orders for Severe Peripartum Hypertension with Nifedipine**

**Plan Selection Display: OB Orders for Severe Peripartum Hypertension with Nifedipine**

**PlanType: Medical**

**Initial Treatment**

**Communication**

  Notify Provider Vital Signs

 *Notify MD if SBP ≥ 160 or DBP ≥ 110 and institute fetal surveillance if undelivered*

* Notify Provider Vital Signs and initiate Labetalol medication administration

 *Notify MD if SBP ≥ 160 or DBP ≥ 110 on 2 consecutive readings, 15 minutes apart, BP should be taken with appropriate cuff in a sitting or semi-reclining position with the back supported.*

  *If pre-eclampsia, then Magnesium Sulfate infusion as per "OB Preeclampsia and Magnesium IV Administration" protocol (4g bolus over 30 minutes, then 2g/hr)*

  *Repeat and record pulse and BP q 10 minutes until target range of SBP <160 and DBP <110*

  *Once the target BP is achieved, repeat BP measurement every 10 minutes for 1 hour, then every 15 minutes for 1 hour, then every 30 minutes for 1 hour, then every hour for 4 hours*

*hours*

  Notify Provider Vital Signs

 *HR < 60, Hold labetalol and notify MD*

**Vital Signs**

  Vital Signs

 *T;N, q10min, until blood pressure target range of SBP <160 and DBP <110*

  Strict ins/outs

**Patient Care**

 Fetal Monitoring

 *Continuous*

  Peripheral IV Insertion

  lidocaine 4% topical cream

 *1 app, TOP, Cream, As Directed PRN, PRN Reason: Painful Procedure, Special Instruction: To numb vascular access site(s); use as directed per physician*

  Reference Text for Severe Intrapartum Hypertension

**IV Solutions**

  LR bolus

 *500 L, IV, Once*

***Nifedipine Pathway***

  NIFEdipine

 *10 mg IR, Oral, q2 hours PRN hypertension*

 *Comments Give for SBP ≥ 160 or DBP ≥ 110. Nifedipine not to exceed 180mg/24 hours. Repeat BP in 20 minutes.*

  NIFEdipine

 *20 mg, Oral, q20mins PRN hypertension*

 *Comments: Give AFTER 20 minutes and a TOTAL of 10 mg Nifedipine IR for SBP ≥ 160 or DBP ≥ 110. Repeat BP in 20 minutes and give an additional 20mg x 1 for persistent SBP ≥ 160 or DBP ≥110. Nifedipine not to exceed 180mg/24 hours.*

  labetalol inj

 *20 mg, IV Push, q2hr PRN, PRN Reason: Hypertension*

 *Comments: Give AFTER 20 minutes and a TOTAL of 50 mg Nifedpine IR for continued SBP ≥ 160 or DBP ≥ 110. Hold for HR < 60 bpm. Total cumulative IV dose not to exceed 300 mg/24 hrs. Give over 2 minutes. Repeat BP in 10 minutes.*

  Communication Order

 *If either BP threshold (systolic BP > or = 160 or diastolic > or = 110) persists 10 minutes after administering labetalol 20mg consider MFM consult and transfer to CCU.*

**Standing Medication:**

**Titrate up to maximum dose on 1 agent before adding a second agent.**

 NIFEdipine 30 mg extended release oral tablet (Drop-down to select Frequency)

 *30 mg XL Oral Daily*

 *30 mg XL Oral BID*

 *Comments: Not to exceed 180mg/24 hours. Hold for SBP <100 or DBP <60*

 NIFEdipine 60 mg extended release oral tablet (Drop-down to select Frequency)

 *60mg XL Oral Daily*

 *60mg XL Oral BID*

 *Comments: Not to exceed 180mg/24 hours. Hold for SBP <100 or DBP <60*

 NIFEdipine 90 mg extended release oral tablet (Drop-down to select Frequency)

 *90mg XL Oral Daily*

 *90mg XL Oral BID*

 *Comments: Not to exceed 180mg/24 hours. Hold for SBP <100 or DBP <60*

 Labetalol 200mg oral tablet (Drop-down to select Frequency)

 *200 mg Oral BID*

 *200 mg Oral TID*

 *200 mg Oral QID*

 *Comments: Not to exceed 2400 mg/24 hours. Hold forf HR <60. Hold forS BP < 100 or DBP < 60*

 Labetalol 300mg oral tablet (Drop-down to select Frequency)

 *300mg Oral BID*

 *300mg Oral TID*

 *300mg Oral QID*

 *Comments: Not to exceed 2400 mg/24 hours. Hold forf HR <60. Hold forS BP < 100 or DBP < 60*

 Labetalol 400mg (Drop-down to select Frequency)

 *400mg Oral BID*

 *400mg Oral TID*

 *400mg Oral QID*

 *Comments: Not to exceed 2400 mg/24 hours. Hold forf HR <60. Hold forS BP < 100 or DBP < 60*

 Labetalol 800mg (Drop-down to select Frequency)

 *800mg Oral BID*

 *800mg Oral TID*

 *Comments: Not to exceed 2400 mg/24 hours. Hold forf HR <60. Hold forS BP < 100 or DBP < 60*

Reviewed and approved 03/19/20 by OB-GYN, IP Pharmcy