**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