



Patient Identification Information

MERCY HOSPITAL OF BUFFALO • Buffalo, NY

SISTERS OF CHARITY HOSPITAL • Buffalo, NY

Allergies & Sensitivities:

No Known Allergies (Indicates automatic order. MD to draw line through orders to discontinue)

INDUCTION/AUGMENTATION OF LABOR

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Authorization is hereby given to dispense the generic/therapeutic equivalent unless otherwise indicated by the prescriber

Date:

Time:

Prescriber Orders

INDICATION FOR INDUCTION:

- Postdates (greater than 41 weeks) LMP: _____ U/S: _____
- Chorioamnionitis
- Maternal medical condition: _____
- Logistic factors (rapid labor, significant distance from hospital)
- Other: _____
- Premature rupture of membranes
- Suspected fetal jeopardy (i.e. IUGR, Oligohydramnios)
- Fetal Demise
- Preeclampsia

INDICATION FOR AUGMENTATION: In the absence of contraindication (i.e. known CPD) and with the presence of uterine hypo-contraction, the following labor abnormalities may require augmentation:

- Prolonged latent phase
- Arrest of descent
- Protracted descent
- Secondary arrest of labor
- Protracted active phase

EVALUATION OF MATERNAL/FETAL STATUS

Evaluating physician: _____

EDC: _____

Cervical exam: Dilatation: _____ Effacement: _____ Station: _____ Consistency: _____ Position: _____

Presentation: _____

Reassuring fetal status: Yes Pelvis adequate: Yes

Discussion with the patient of indication for induction/augmentation, method, risk: Yes No

Plan of management is acceptable to the woman: Yes No

Attending aware of plan of care: Yes No

INDUCTION/AUGMENTATION ORDERS:

- Transcervical Balloon Induction
- Dinoprostone (Cervidil) 10 milligrams vaginal suppository once** (VBAC patient not a candidate)
- Misoprostol (Cytotec) intravaginally in posterior vaginal fornix:** (VBAC patient not a candidate)

Initial dose: 25 mcg 50 mcg

Subsequent Misoprostol (Cytotec) doses intravaginally in posterior vaginal fornix every _____ hours

Initiate Oxytocin (Pitocin) (specify dosing regimen):

Initiate Induction: 15 units Oxytocin in 250 mL Lactated Ringers (60 milliunits/mL)

- Initiation of **Induction:** 1 milliunit/minute (1 mL/hr)
- 2 milliunits/minute (2 mL/hr)

- Increments: Increase by
- 1 milliunit/minute (1 mL/hr) every 15 minutes
 - 2 milliunits/minute (2 mL/hr) every 15 minutes
 - 1 milliunit/minute (1 mL/hr) every 30-60 minutes
 - 2 milliunits/minute (2 mL/hr) every 30-60 minutes

Initiate Augmentation: 15 units Oxytocin in 250 mL Lactated Ringers (60 milliunits/mL)

- Initiation of **Augmentation:** 1 milliunit/minute (1 mL/hr)
- 2 milliunits/minute (2 mL/hr)

- Increments: Increase by
- 1 milliunit/minute (1 mL/hr) every 15 minutes
 - 2 milliunits/minute (2 mL/hr) every 15 minutes
 - 1 milliunit/minute (1 mL/hr) every 30-60 minutes
 - 2 milliunits/minute (2 mL/hr) every 30-60 minutes

Increments of increases will continue until adequate contractions (every 2-3 minutes) with reassuring fetal status or up to :

- 20 milliunits/minute
- 30 milliunits/minute

Notify physician if hyperstimulation or non-reassuring fetal status

Additional rate increases require further evaluation and additional orders

Prescriber Signature: _____

Date: _____ Time: _____