

# Pre-Eclampsia Emergent Treatment Orderset

General	
<i>Nursing Assessments</i>	
Notify or call physician for	Routine, PRN SBP less than or equal to (mmHg): SBP greater than or equal to (mmHg): <b>140</b> DBP less than or equal to (mmHg): DBP greater than or equal to (mmHg): <b>90</b> Pulse less than or equal to (BPM): Pulse greater than or equal to (BPM): Respiratory rate less than or equal to (rate/min): Respiratory rate greater than or equal to (rate/min): SPO2 less than or equal to (%): ETCO2 above (mm): ETCO2 below (mm): Temperature greater than or equal to (Deg.C): Urine output less than or equal to (mL/hr): 30 Urine output greater than or equal to (mL/hr): 200 Urine output less than (mL/kg/hr): Urine output greater than (mL/kg/hr): Other (specify): Therapeutic Magnesium Level 4- 7 mEq/dL, notify physician when outside range Call MD if: Therapeutic Magnesium Level 4- 7 mEq/dL, notify physician when outside range or if output is greater than 200 mL/hr or less than 30 mL/hr., L&D Continuous
Patellar reflexes	Routine, EVERY SHIFT
Notify L & D	ONCE
Labs/Blood Bank	
<i>Chemistry</i>	
Comprehensive metabolic panel	ONCE, Labor and Delivery PRN Reason (please specify if PRN frequency selected)?
Magnesium - every 6 hours	EVERY 6 HOURS NON-SPECIFIED, L&D Continuous PRN Reason (please specify if PRN frequency selected)?
Magnesium - every 12 hours	EVERY 12 HOURS NON-SPECIFIED, L&D Continuous PRN Reason (please specify if PRN frequency selected)?
Uric acid	ONCE, Labor and Delivery PRN Reason (please specify if PRN frequency selected)?
CBC (without Diff)	ONCE PRN Reason (please specify if PRN frequency selected)?
HCG, quantitative, pregnancy	STAT For 1 Occurrences PRN Reason (please specify if PRN frequency selected)?

<b>Urine</b>	
Protein, urine, random	ONCE
<b>Hematology</b>	
APTT	STAT For 1 Occurrences PRN Reason (please specify if PRN frequency selected)?
Type and screen	STAT For 1 Occurrences, Labs Date of last rhogam injection? Fetal demise, abortion etc. ? Has patient been pregnant within the last 3 months? Has patient been transfused within the last 3 months?
CBC (without Diff)	ONCE PRN Reason (please specify if PRN frequency selected)?
CBC (with Diff)	ONCE PRN Reason (please specify if PRN frequency selected)?
Protime-INR	STAT For 1 Occurrences PRN Reason (please specify if PRN frequency selected)?
Fibrinogen	STAT For 1 Occurrences Results must be available PRIOR to initiating protocol. PRN Reason (please specify if PRN frequency selected)?
<b>Imaging</b>	
Ultrasound biophysical profile	Routine, ONCE For 1 Reason for exam (include signs/symptoms):
Ultrasound limited OB for AFI	Routine, ONCE For 1 Reason for exam (include signs/symptoms):
<b>Medications</b>	
<b>Saline Lock and Saline Flush</b>	
Saline lock IV NS 10-30 mL IV flush PRN	Routine, CONTINUOUS, Post-op 10-30 mL, Flush, PRN, Line Care, Post-op
<b>IV Fluids</b>	
Lactated Ringers infusion	Intravenous, CONTINUOUS (total IV fluids not to exceed 125mL/hr)
D5 LR infusion	Intravenous, CONTINUOUS (total IV fluids not to exceed 125mL/hr)
D5W - NS infusion	Intravenous, CONTINUOUS (total IV fluids not to exceed 125mL/hr)
D5W-1/2 NS infusion	Intravenous, CONTINUOUS (total IV fluids not to exceed 125mL/hr)
NS infusion	Intravenous, CONTINUOUS (total IV fluids not to exceed 125mL/hr)
1/2 NS infusion	Intravenous, CONTINUOUS (total IV fluids not to exceed 125mL/hr)
<b>Antiepileptics</b>	

Magnesium sulfate 4 Gm bolus followed by magnesium infusion	<b>"Followed by" Linked Panel</b>
Magnesium 4 Gm IV once Loading dose	2 Gm Intravenous, over 10 Minutes, For 2 doses Run EACH DOSE over 10 minutes. Loading dose
<b>Followed by</b>	
Magnesium sulfate 20 Gm /500 mL infusion @ 2 Gm/hr Maintenance dose	2 Gm/hr, Intravenous, CONTINUOUS Maintain serum magnesium levels between 4 and 7 milliequivalent/liter (total IV fluids not to exceed 125mL/hr) ED ORDER
<b>OR</b>	
Magnesium sulfate 20 Gm /500 mL infusion @ 2 Gm/hr Maintenance dose	2 Gm/hr, Intravenous, CONTINUOUS Maintain serum magnesium levels between 4 and 7 milliequivalent/liter (total IV fluids not to exceed 125mL/hr) ED ORDER
<b>Antidotes and Rescue Agents MRH</b>	
calcium gluconate 1 Gm IV once PRN may repeat x 1	1 Gm, Intravenous, for 60 Minutes, PRN, Rescue Agent, For 2 Doses May repeat x 1 ED ORDER
<b>Beta Blocker / Vasodilators-MRH (Single Response)</b>	
labetalol (NORMODYNE,TRANDATE) 20 mg IV PRN	20 mg, Intravenous, PRN For BP greater than 160/110 mmHg. Recheck blood pressure in 10 minutes. May administer 40 mg IV if BP above 160/110 mmHg. Repeat blood pressure in 10 minutes. May administer 80 mg IV if BP is still above 160/110. Max dose of 300 mg. If desired blood pressure is below threshold continue to monitor BP closely. High Blood Pressure, For 13 Doses, ED ORDER
hydrALAZINE (APRESOLINE) 5 mg IV q 20min PRN	5 mg, Intravenous, EVERY 20 MINUTES PRN For BP greater than 160/110 mmHg. May repeat 5 - 10 mg IV every 20 minutes as needed after the initial 5 mg IV bolus. Max total dose of 20 mg. If desired blood pressure is below threshold continue to monitor BP closely. for High Blood Pressure, For 4 Doses, ED ORDER
<b>Agents to Use: No IV Access</b>	
labetalol (NORMODYNE,TRANDATE) 200 mg ORAL	200 mg, orally Repeat in 30 minutes if systolic blood pressure remains greater than or equal to 160 or diastolic blood pressure greater than or equal to 110 and intravenous access still unavailable, ED ORDER
nifedipine 10 mg ORAL (not for sublingual use)	10 mg, orally ( not for sublingual use) Repeat in 30 minutes if systolic blood pressure remains greater than or equal to 160 or diastolic blood pressure greater than or equal to 110 and intravenous access still unavailable, ED ORDER