Rainy Lake MEDICAL CENTER
In association with SMDC Health System

Pre-term Labor
Pre-printed Orders

Original Date	06/2005	Revision Date	02/2010	Withdrawn Date	

1. External Electronic Fetal Monitoring (US and TOCO) to confirm/evaluate fetus and labor.
2. NPO
3. Maintain left sided bed rest.
4. Establish IV line of 1000ml LR with large bore IV needle.
5. Bolus _____ ml's of LR IV fluid then continue IV rate at _____ml's / hr.
6. Obtain UA specimen and send to lab
7. Nitrazine testing for signs of ruptured membranes
8. No vaginal exams unless ordered by physician
9. Lab:
   _____ Urine Culture if indicated
   _____ Chlamydia, Gonorrhea Culture
   _____ Group B Strep
   _____ Type and Screen if unknown

   Lab (other)
_____
10. Activity:

_____
11. Accurate Intake and Output
12. **Pharmacy Orders:**
    _____ Terbutaline 0.25mg subcutaneously STAT
    _____ Magnesium Sulfate infusion, via volume control device
    Premixed Bag contains: Magnesium Sulfate 40 mg/ml (20 gms Magnesium Sulfate in 500ml water for Injection).
    _____ **Loading Dose** of 4 grams (4000 mg/ 100 ml) infused over 20 minutes
    Rate of loading dose is 300ml/hr when using above premix solution.
    _____ **Maintenance** dose of Two grams (2000 mg) (50ml/hr) per hour initially
    1 gm (1000 mg) / hr = 25 ml / hr
    2 gm (2000 mg) / hr = 50 ml / hr
    3 gm (3000 mg) / hr = 75 ml / hr
    4 gm (4000 mg) / hr = 100 ml / hr
    _____ Notify Physician for dosage adjustment

    _____Calcium Gluconate 4.65mEq of a 10% preparation at the bedside to be administered if signs or symptoms of Magnesium Sulfate toxicity. Give 10ml's of the 0.465 mEq /ml of Calcium Gluconate slow IV push (10ml over 7 – 10 min)
    _____ Dexamethasone 6mg IM every 12 hours for four doses

    _____ Antibiotic: _____

_____ _____/_____/_____ _____:_____
Physician Signature Date Time

PATIENT STICKER