

Labor & Delivery Medication Worksheet

Medication	Mechanism of Action	Maternal Effects	Fetal Effects	Nursing Management
Oxytocin	Stimulates uterine contractions	-uterine hyperstimulation -water intoxication -hypotension	Fetal distress from decreased oxygen	-Monitor contractions and fetal heartrate *STOP if hyperstimulation occurs
Misoprostol	-ripens cervix -causes uterine contractions	-nausea -diarrhea -fever -uterine rupture (RARE)	Distress if contractions are too frequent	Monitor uterine activity and fetal heartrate AVOID in women with previous c-section
Turbutaline	relaxes uterine smooth muscle (tocolytic)	-tachycardia -tremors -palpitations -hypotension	-increased heart rate -hypoglycemia	Monitor maternal pulse and BP Monitor fetal heart rate HOLD if maternal pulse >120 bpm. Monitor infant blood sugar
Magnesium Sulfate	-CNS depressent -relaxes smooth muscle -prevents seizures	-flushing -decreased reflexes -respiratory depression -hypotension	-decreased variability -lethargy -respiratory depression at birth	Monitor reflexes, respirations, urine output Keep calcium gluconate available as antidote.

<p>Carboprost Tromethamine</p>	<p>Stimulates uterine contractions to control bleeding.</p>	<ul style="list-style-type: none"> -nausea -vomiting -diarrhea -fever -hypotension -bronchospasm 	<p>Not typically used when fetus is alive (postmortum use)</p>	<p>Monitor vital signs</p> <p>Watch for asthma, respiratory issues</p> <p>Control diarrhea with meds if needed.</p>
<p>Dinoprostone</p>	<ul style="list-style-type: none"> -cervical ripening agent -stimulates uterine contractions 	<ul style="list-style-type: none"> -nausea -vomiting -fever -uterine hyperstimulation 	<p>Fetal distress if contractions are too frequent</p>	<p>Monitor uterine activity and fetal heart rate</p> <p>Keep patient lying down for at least 30 minutes after administration</p>