

Medication	Mechanism of action	Nursing considerations
Methotrexate	Exerts immunosuppressive effects by inhibiting replication and function of T and B lymphocytes. Also slows rapid cellular growth, such as epithelial skin cells in psoriasis. This action results from the drug's inhibition of the enzyme that reduces folic acid to tetrahydrofolic acid. Inhibition of this acid interferes with DNA synthesis and cell reproduction in rapidly proliferating cells.	<ul style="list-style-type: none"> -Alcohol use: Increased risk of hepatotoxicity -Monitor CBC, chest XR, liver and renal function tests, and urinalysis before and during treatment -Increase fluid intake 2-3 L daily unless contraindicated, to reduce risk of GU reactions -Assess for signs of bleeding -Instruct patient to use sunblock -Patients should use reliable contraception during therapy
Mifepristone	Anti-progestational activity results from competitive interaction with progesterone at progesterone receptor sites. It inhibits the activity of endogenous or exogenous progesterone. The termination of pregnancy results. In Cushing's syndrome it blocks the binding of cortisol to its receptor but does not decrease production. It reduces the effects of excess cortisol such as high blood sugar.	<ul style="list-style-type: none"> -Notify provider if weakness, nausea, vomiting, diarrhea, abdominal pain, or fever occur more than 24 hr after taking -Inform patient vaginal bleeding and uterine cramping 9-16 days after may occur -Contraindicated if IUD present -If taken for other use besides abortion a pregnancy test should be given before therapy begins and a reliable contraceptive will be required
Rhogam	Acts by suppressing the immune response of Rh-negative individuals to Rh-positive red blood cells.	<ul style="list-style-type: none"> -Usually given at regular intervals during last half of pregnancy and again after the baby is born
Promethazine	Competes for H1 receptor sites, thereby antagonizing many histamine effects and reducing allergy signs and symptoms, also prevents motion sickness, nausea, and vertigo by acting on medullary chemoreceptor trigger zone, and decreasing vestibular and labyrinthine function in the inner ear. It also promotes sedation and relieves anxiety.	<ul style="list-style-type: none"> -Monitor patient for fever, hypertension, hypotension, mental changes, muscle rigidity, tachycardia, and tachypnea -Patient should avoid alcohol or other CNS depressants during therapy -Patient should wear sunscreen
Pyridoxine and Doxylamine	Doxylamine is an antihistamine used to treat insomnia and allergy symptoms and is used with pyridoxine in the treatment of nausea and vomiting during pregnancy. Competes for H1 receptors and has substantial sedative and anticholinergic effects.	<ul style="list-style-type: none"> -Patient should avoid alcohol -Not recommended for women breastfeeding
	Blocks serotonin receptors centrally in the chemoreceptor trigger zone and peripherally at vagal nerve terminals in the intestine. This	<ul style="list-style-type: none"> -Alcohol use: Increased stimulant and sedative effects -Monitor for serotonin syndrome -Monitor for decreased bowel activity

Ondansetron	action reduces nausea and vomiting by preventing serotonin release in the small intestine and by blocking signals to the CNS.	
Betamethasone	Binds to intracellular glucocorticoid receptors and suppresses inflammatory and immune responses by inhibiting neutrophil and monocyte accumulation at inflammation sites and suppressing phagocytic and bactericidal activity. Also stabilizes lysosomal membranes, and suppresses antigen response of macrophages and helper T cells. Inhibits synthesis of inflammatory response mediators, such as cytokines, interleukins, and prostaglandins.	<ul style="list-style-type: none"> -Get baseline ophthalmologic examination prior to starting therapy can lead to glaucoma and increased intraocular pressure -May cause immunosuppression -Monitor electrolyte and fluid level -Expect to slowly taper oral dosage to prevent adrenal insufficiency
Indomethacin	Blocks activity of cyclooxygenase, the enzyme needed to synthesize prostaglandins, which mediate inflammatory response and cause local vasodilation, pain, and swelling. This NSAID reduces inflammatory symptoms and helps relieve pain.	<ul style="list-style-type: none"> -Alcohol use: Increased risk of adverse GI effects -Monitor for GI bleeding, and anemias -Monitor Bp for hypertension -Indomethacin appears in breast milk and may cause seizures in infants, use alternative feeding method during therapy
Magnesium Sulfate	Competitively blocks intracellular calcium channels, decreasing calcium availability and thus inhibiting smooth muscle contraction.	<ul style="list-style-type: none"> -May cause diarrhea -Monitor for hypermagnesemia: bradycardia, depressed deep tendon reflexes, dyspnea, flushing, hypotension, nausea and weakness -Monitor serum electrolyte levels -May cause fetal abnormalities if administered for more than 5-7 days to pregnant women
Terbutaline Sulfate	Terbutaline is a bronchodilator, a medication that dilates (expands) air passages in the lungs. It attaches to beta adrenergic receptors on muscles surrounding the air passages, causing the muscles to relax and dilate the air passages.	<ul style="list-style-type: none"> -may cause nervousness,restlessness, tremors -beta blockers can reduce effect -assess respiratory status -monitor maternal/fetal vital signs if using for preterm labor -monitor for hypoglycemia -may cause decreased potassium level
Glyburide	Glyburide reduces glucose in the blood by stimulating the pancreas to produce more insulin.	<ul style="list-style-type: none"> -Give drug before breakfast. If severe GI upset occurs, dose may be divided and given before meals. -Monitor urine or serum glucose levels frequently to determine drug effectiveness and dosage. -Do not use this drug during pregnancy; consult a healthcare provider.

		<ul style="list-style-type: none"> -Avoid alcohol while using this drug. -Report fever, sore throat, unusual bleeding or bruising, rash, dark urine, light-colored stools, hypoglycemic or hyperglycemic reactions.
Insulin	<p>Lowers blood glucose levels by stimulating peripheral glucose uptake by fat and skeletal muscle, and by inhibiting hepatic glucose production. Also enhances protein synthesis, inhibits lipolysis in adipocytes, and inhibits proteolysis.</p>	<ul style="list-style-type: none"> -Monitor patient closely for hypoglycemia -Monitor blood glucose level closely to detect need for dosage change -Educate patient on self administration and sick day rules
Hydralazine hydrochloride	<p>It is a direct-acting smooth muscle relaxant and acts as a vasodilator primarily in resistance arterioles, also known as the smooth muscle of the arterial bed.</p>	<ul style="list-style-type: none"> -Be cautious of orthostatic hypotension -May cause drowsiness -Take medication at the same time everyday
Labetalol	<p>Labetalol is an adrenergic receptor blocking agent that has both nonselective beta-adrenergic and selective alpha1 adrenergic receptor blocking actions. As a nonselective beta blocking agent it slows sinoatrial (SA) discharge, AV conduction and lessens ventricular inotropy (force of muscle contraction). It also causes alpha blockade effects which result in vasodilatation and a diminishment in peripheral resistance.</p>	<ul style="list-style-type: none"> -Monitor vital signs and cardiac rhythm closely -Use cautiously in diabetes mellitus, renal disease, liver disease, thyroid disease, COPD, Bronchospasm -Keep patient supine for 3 hours after IV administration
Nifedipine	<p>Nifedipine is a peripheral arterial vasodilator which acts directly on vascular smooth muscle. The binding of nifedipine to voltage-dependent and possibly receptor-operated channels in vascular smooth muscle results in an inhibition of calcium influx through these channels.</p>	<ul style="list-style-type: none"> - Assess for anginal pain, including location, intensity, duration, and alleviating and aggravating factors. - Assess cardiac status with BP, pulse, respiration and ECG. - Monitor potassium and liver function tests throughout treatment with nifedipine.
Calcium gluconate	<p>Increases calcium needed to maintain homeostasis especially in the nervous system and musculoskeletal system. Plays role in normal cardiac and renal function, respiratory, coagulation, and cell membrane and capillary permeability</p>	<ul style="list-style-type: none"> -Patient should avoid alcohol and tobacco -Take calcium separate from other prescribed drugs -Monitor serum calcium
Misoprostol	<p>May protect the stomach from NSAID-induced mucosal damage by increasing gastric mucus production</p>	<ul style="list-style-type: none"> -Can cause teratogenic effects in the fetus, may cause contractions, spontaneous abortion

	and mucosal bicarbonate secretion. Also inhibits gastric acid secretion caused by such stimuli as coffee, food, and histamine.	-A pregnancy test should be taken before therapy begins -Patient should report diarrhea
Cervidil	Prostaglandin, a hormone-like substance that is naturally produced by the body, used in a pregnant woman to relax the muscles of the cervix in preparation for inducing labor at the end of pregnancy.	-Observe patient carefully after insertion of the drug -Monitor uterine contractions and report any excessive vaginal bleeding
Penicillin G	Class of antibiotics that is a bactericide. It inhibits the biosynthesis of the cell wall peptidoglycan making the bacteria osmotically unstable.	-monitor for allergic/anaphylaxis reaction -assess for muscle aches and joint pain -monitor for eosinophilia or leukopenia
Methylergonovine	Oxytocic drug that increases strength, duration, and frequency of uterine contractions. Used for treatment of postpartum atony and hemorrhage and for uterine stimulation during the second stage of labor after delivery of the anterior shoulder.	-monitor for hypertension, headache, dizziness, palpitations, and GI upset
Nalbuphine (Nubain)	Synthetic analgesic used for moderate to severe pain. Agonist for kappa and partial mu-opioid activity.	-most common adverse effect is sedation -hypertension, hypotension, bradycardia, or tachycardia
Naloxone--	Used if neonatal respiratory depression occurs from opioid administration to mother during labor.	-monitor if patient has mild to moderate hypertension cause severe hypertension may occur
Fentanyl	Preanesthetic and postoperative analgesia medication that is an opioid agonist.	-monitor for respiratory depression -contraindicated in use of acute pain like headaches or migraines
Ibuprofen	Relieves mild to moderate pain and reduces inflammation by inhibiting COX enzymes used in prostaglandin formation. It is used in treatment of patent ductus arteriosus in neonates that don't respond to conventional medical treatment.	-contraindicated in patients with known NSAID and salicylate allergy -assess for dyspepsia or GI bleeding
acetaminophen	Analgesic and antipyretic medication that doesn't cause nausea, vomiting, or GI bleeding. Acts on the hypothalamus to increase vasodilation and sweating.	-drug crosses the placenta and enters breast milk so should be used with caution in those patients -monitor for renal and hepatic impairment
oxycodone	Derivative of codeine used to relieve moderate pain that works as an	-can cause fatal or life-threatening respiratory depression

	opioid agonist.	-should be taken 1 hour before or 2 hours after eating
hydrocodone	Opioid agonist that is an analgesic and antitussive.	-metabolized by the liver and excreted through the kidneys
ketorolac	To treat mild to moderate severe pain. Blocks the activity of cyclooxygenase, which mediate inflammatory response.	Increases risk of premature closure of the fetus ductus artery if given during the third trimester. It should be avoided starting at 30 weeks of gestation and onward.
Hepatitis B vaccine	Hepatitis b vaccine is recommended for pregnant women who are at risk for acquiring hepatitis b during pregnancy.	The vaccine does not cause harm to the fetus or any risk.
Erythromycin eye ointment	Used to treat pink eye in newborns and other forms of eye infections.	May be an increased chance of birth defects, including heart defects and pyloric stenosis. Drug can be present in breast milk and should notify the provider before use.
Phytonadione	Catalyzes the hepatic synthesis of blood clotting. Prevents bleeding in people with blood clotting disorders or if they have to little vitamin K in the body.	Monitor patient constantly and get frequent labs for blood clotting it is essential to prevent serious bleeding.
Prenatal vitamins	Multivitamin and iron product use to treat and prevent vitamin deficiency due to poor diet certain illness or during pregnancy.	Folic acid supplement should begin taking at least 1 month before you try to get pregnant to prevent birth defects. Fat soluble vitamin supplements like vitamin A and E taken by the mother can concentrate in human milk and excessive amounts may be harmful to a breastfeeding baby. Need to be monitored on a case-by-case basis.
MMR vaccine	Protects against the measles, mumps, and rubella.	Best to see if you are immune to these before getting pregnant. If you are not immune to these, then you should wait at least a month before trying to get pregnant. If any of these diseases are contracted in early pregnancy, can lead to a miscarriage, birth defects involving deafness and defects involving the eyes, heart, and brain.
Tetanus & reduced diphtheria toxoids/acellular	Tdap creates antibodies that protect against tetanus, diphtheria, and pertussis.	This vaccine is recommended for each pregnancy even if they have gotten vaccinated before. It should be given

pertussis vaccine		27-36 weeks of pregnancy.
Lidocaine mucosal gel	Used in many different mucosal areas of the body. Can be prescribed for perineum after a vaginal birth as a topical pain reliever.	Monitor the client for toxicity. Apply to gauze before applying to the skin.
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