

Medication	Mechanism of Action/Use in OB	Nursing Considerations
<b>Methotrexate</b> (Used for ectopic pregnancy, kills embryo)	"Methotrexate interferes with the growth of certain cells of the body, especially cells that reproduce quickly, such as cancer cells, bone marrow cells, and skin cells" Used for ectopic pregnancy	-It is excreted in breast milk -Impairs fertility -Can alter current laboratory levels
<b>Mifepristone</b>	Progesterone antagonist (Used for medical abortions, induces labor- fetal demise)	-Excreted in breast milk
<b>Rhogam</b>	Rhogam suppresses the immune response of Rh-negative individuals to Rh-positive red blood cells (Given to mom who is Rh negative and has a Rh-positive baby; given at 28 weeks)	Watch for signs of pre-term labor related to blood type incompatibility Monitor maternal and fetal VS q15min for an hour post-injection. Have the mother monitor for fever. Educate the patient that she will need this treatment for subsequent pregnancies with Rh-positive fetuses.
<b>Betamethasone</b> (Given to moms to mature baby's lungs)	Betamethasone is used to promote the maturity of fetal lungs by stimulating the production of surfactant, thereby reducing the risk of respiratory distress and intraventricular hemorrhage in a pregnancy of less than 34 weeks gestation.	Monitor the mother for infection or pulmonary edema (lung sounds). This injection should be given in two doses 24 hours apart. Discuss the potential benefits for the fetus.
<b>Indomethacin</b> (used in pre-term labor – not given often)	Indomethacin is a prostaglandin synthesis inhibitor which decreases fetal urinary output, thereby reducing amniotic fluid volume. Also used to inhibit uterine activity, arresting preterm labor.	Monitor maternal and fetal VS. Other adverse effects in the mother may include n/v, dyspepsia, rash, prolonged bleeding time, oligohydramnios, and hypertension. Hold in cases of greater than 32 weeks of gestation, fetal growth restriction, asthma, urticaria, allergy to aspirin/NSAIDs, and PUD.
<b>Magnesium Sulfate</b> (Anticonvulsant, for preeclampsia, given as neurological protection for mom, lowers BP)	Magnesium sulfate arrests preterm labor (off-label) by relaxing uterine muscles to stop irritability/contractions. Also used in seizure prophylaxis in preeclamptic/eclamptic patients.	Assess VS (respirations, lung sounds) and DTRs hourly, maintain availability of calcium gluconate, report hypotension and depressed/absent DTRs. Monitor strict I&O's and assess for signs of hypermagnesemia.
<b>Calcium gluconate</b> (Antidote for magnesium	Terbutaline sulfate is a beta adrenergic receptor agonist used in preventing/reversing bronchospasm related to asthma, though it has	Patients should be monitored for hypertension, chest pain, and decreased/inadequate respirations. Should not be given orally for the

toxicity)	been used in preventing/treating preterm labor due to its side effect of pausing uterine contractions.	treatment of preterm labor. Injection form is contraindicated for treatment lasting more than 72 hours for preterm labor.
<b>Terbutaline Sulfate</b>	Hydralazine hydrochloride reduces blood pressure by relaxing vascular smooth muscle and increasing perfusion to renal, uterine, and cerebral areas.	Withdraw slowly to prevent rebound hypertension. Monitor for adverse effects.
<b>Hydralazine hydrochloride (BP)</b>	Labetalol is an alpha-1 and beta blocker that reduces blood pressure.	Monitor for adverse effects.
<b>Labetalol (BP)</b>	Nifedipine is a calcium channel blocker which decreases blood pressure by dilating coronary arteries/arterioles and peripheral arterioles.	Administer with caution in patients receiving magnesium sulfate and for patients with slower pulse. Monitor for decreased uteroplacental blood flow (fetal bradycardia), flushing, headache, intermittent tachycardia (maternal and fetal), palpitations, edema, and postural hypertension.
<b>Nifedipine (BP)</b>	Calcium gluconate is used in cases of magnesium toxicity. May also be prescribed in cases of neonatal hypocalcemia, as evidenced by tremors, jitteriness, seizures, twitching, and a high-pitched cry.	Monitor for cardiac arrhythmias (which may result from extravasation), fluid-electrolyte imbalances, inadequate urinary calcium excretion, and stridor. Initiate seizure precautions.
<b>Misoprostol</b> (Ripen the cervix)	Misoprostol is used to terminate a pregnancy and evacuate the uterus after an abortion in order to ensure all products of conception are passed. This is accomplished by stimulating uterine contractions.	Monitor for n/v/d, dyspepsia, and other abdominal pain; also monitor for shock as manifested through tachycardia, hypotension, and anxiety. Continue to assess vaginal bleeding (reporting increase of bleeding, pain, or fever).
<b>Cervidil</b> (Ripen the cervix)	Cervidil is used to stimulate uterine contractions and expel the contents of the uterus, as in a fetal death in the second trimester or in needing to cause effacement and dilation of the cervix at full-term.	Ensure gel is at room temperature, does not contact the skin, and is administered with sterile technique. The client should remain supine for 30 minutes post-procedure, and the insert should be removed with a retrieval system 12 hours later or with the onset of labor.
<b>Methylergonovine</b> (Given if too much bleeding)	Methylergonovine is used in stimulating the uterus to prevent/treat postpartum hemorrhage related to atony or subinvolution.	Determine baseline bleeding, VS q15min, and uterine tone. Monitor for adverse effects such as n/v, hypertension, palpitations, uterine cramping, and seizures. Contraindicated in hypertension. Report chest pain immediately.
<b>Hepatitis B vaccine</b>	Hepatitis B vaccine is administered to all neonates in most hospitals and is then repeated two more times	Ensure the mother is educated on the benefits of her child receiving the vaccine as well as numerous studies

	within six months to prevent hepatitis B.	showing positive outcomes related to the vaccine.
<b>Erythromycin eye ointment</b>	Erythromycin eye ointment is used as a bactericidal and bacteriostatic agent in cases of gonorrhea and chlamydia to prevent infection in infant	Monitor for chemical conjunctivitis for 1-2 days. Apply into the conjunctival sac from the inner to the outer canthus. Take care not to touch the eye with the tube/ampule tip. Close the eye. Wipe away excess medication after 1 minute.
<b>Phytonadione (Vitamin K)</b>	Phytonadione is used to supply the neonate with vitamin K since newborns lack Vitamin K at birth.	Administer 1-2 hours after birth as an IM injection into the vastus lateralis with a 25g 5/8-in needle, to be administered slowly and assessed for bleeding at the injection site.
<b>Prenatal vitamins</b>	Prenatal vitamins are vitamins that you give to mothers if one is lacking something.	Educate the patient on the importance of increasing folic acid intake to prevent neural tube defects. Discuss iron supplements to prevent anemia related to the increased need for blood cell formation in pregnancy.
<b>MMR vaccine</b>	MMR vaccine is used in the prevention of measles, mumps, and rubella.	Educate the mother on the decrease in incidence of these diseases associated with the implementation of the vaccine. Explain studies conducted which show the vaccine to be effective.

Jones & Bartlett Learning. (2022). *2022 Nurse's drug handbook* (19<sup>th</sup> ed.). Jones & Bartlett Learning.

Ricci, S. S., Kyle, T., & Carman, S. (2021). *Maternity and pediatric nursing* (4th ed.). Wolters Kluwer.