

Medications Commonly used in Maternal Newborn

Medication	Mechanism of Action/Use	Nursing considerations
Methotrexate	<p><b>Antineoplastic- anticancer</b></p> <p><b>Exert immunosuppressive effects by inhibiting replication and function of T and possibly B lymphocytes</b></p>	<p><b>Monitor results of CBC, chest X-ray, liver and renal functions, and urinalysis</b></p> <p><b>Increase pt's fluid intake to 2-3L daily</b></p>
Mifepristone	<p><b>Progesterone blocker- Termination of pregnancy</b></p> <p><b>Antagonizes endometrial and myometrial effects of progesterone</b></p>	<p><b>Assess the amount of bleeding and cramping during the treatment</b></p> <p><b>Monitor for s/s of adrenal insufficiency</b></p>
Rhogam	<p><b>Suppressing the immune response of Rh-negative individuals to Rh-positive red blood cells</b></p>	<p><b>It is not known to be harmful to a baby during pregnancy or while breastfeeding</b></p>
Promethazine	<p><b>Competes with histamine H<sub>1</sub> receptor sites, thereby antagonizing many histamine effects and reducing allergy signs</b></p>	<p><b>Monitor pt's hematologic status</b></p> <p><b>Monitor pt for evidence of neuroleptic malignant syndrome</b></p>
Pyridoxine and Doxylamine	<p><b>Exerts of bacteriostatic effect against a wide variety of gram-positive and gram-negative organisms</b></p>	<p><b>Avoid giving to breastfeeding women</b></p> <p><b>Avoid giving to pt's under 8</b></p> <p><b>Monitor liver function for hepatotoxicity</b></p>
Ondansetron	<p><b>Block serotonin receptors centrally in the chemoreceptor trigger zone</b></p>	<p><b>Be aware of oral disintegrating tablets</b></p> <p><b>Monitor pt for serotonin syndrome</b></p> <p><b>Monitor pt's ECG</b></p>
Betamethasone	<p><b>An adrenocortical steroid that controls the rate of protein synthesis</b></p>	<p><b>This may increase the chance of infection</b></p>
Indomethacin	<p><b>Blocks activity of cyclooxygenase, the enzyme needed to synthesize prostaglandins</b></p>	<p><b>Avoid NSAIDs with pt's with recent MI</b></p> <p><b>Can cause bowel perforation</b></p>
Magnesium Sulfate	<p><b>It assists all enzymes involved in</b></p>	<p><b>Observe for evidence of</b></p>

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	<b>phosphate transfer reactions that use adenosine triphosphate</b>	<b>hypermagnesemia</b> <b>Assess cardiac status</b> <b>Provide adequate diet, exercise</b>
Terbutaline Sulfate	<b>Stimulates beta<sub>2</sub>-adrenergic receptors in the lungs.</b>	<b>Use cautiously on pts with cardiovascular</b> <b>Assess pt's respiratory rate</b>
Glyburide	<b>Stimulates insulin release from beta cells in the pancreas</b>	<b>Use cautiously in pt's with glucose 6-phosphate dehydrogenase deficiency</b>
Insulin	<b>Lowers blood glucose levels by stimulating peripheral glucose uptake by fat and skeletal muscle</b>	<b>Inhaled insulin is not a substitute for long-acting</b> <b>Monitor pt closely for s/s of hypoglycemia</b>
Hydralazine hydrochloride	<b>Vasodilation effect on vascular smooth muscle</b>	<b>Monitor ANA titer, CBC, and lupus erythematosus</b> <b>Monitor blood pressure and heart rate</b>
Labetalol	<b>Selectively block alpha<sub>1</sub> and beta<sub>2</sub> receptors in vascular smooth muscle to reduce cardiac output</b>	<b>Masks are common signs of shock</b> <b>Monitor blood glucose level</b> <b>Don't stop abruptly</b>
Nifedipine	<b>May slow the movement of calcium into myocardial and vascular smooth muscle cells</b>	<b>Caution in pts with hyperthyroidism and insulin-dependent</b> <b>avoid possible burns</b>
Calcium gluconate	<b>Increases the level of calcium in the blood by binding to excess potassium or magnesium in the blood</b>	<b>Give through a central line</b> <b>Monitor ECQ for any cardiac issues</b>
Misoprostol	<b>It inhibits basal and nocturnal gastric acid secretion through direct stimulation of prostaglandin</b>	<b>May cause miscarriages, premature labor, or birth defects</b>
Cervidil	<b>It promotes cervical ripening by stimulating local receptors</b>	<b>Carefully monitor uterine activity, fetal status, and the progression of cervical dilatation</b>

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Penicillin G	It binds penicillin-binding proteins to weaken or cause lysis of the cell wall	Obtain culture and sensitivity before the first dose Assess patients with secondary infection
Methylergonovine	Acts directly on the smooth muscle of the uterus and increases the tone, rate, and amplitude of rhythmic contractions	Mothers should not breast-feed during treatment
Nalbuphine (Nubain)	It binds with kappa and mu opiate receptors in the spinal cord and has higher levels in the CNS	Not recommended for use in pregnant women A stool softener can be given to minimize constipation
Naloxone--	It antagonizes mu, kappa, and sigma receptors in the CNS, reversing analgesia	Expect pt with hepatic or renal dysfunction to have increased circulating blood naloxone level May cause fetal harm
Fentanyl	It binds to opioid receptor sited in the CNS, altering perception of pain	Use cautiously in patients at risk for opioid abuse monitor pt's respiratory status
Ibuprofen	Blocks activity of cyclooxygenase, the enzyme needed to synthesize prostaglandins, and reduces pain	NSAIDS should be avoided with pt's with recent MI Use in caution on pt's with GI bleeds
acetaminophen	Inhibits the enzyme cyclooxygenase, blocking prostaglandin production and interfering with pain	Use cautiously in patients with hepatic impairment Monitor renal function in pt
oxycodone	Alters perception of and emotional response to pain at spinal cord and higher levels of CNS	May cause fetal harm May lead to abuse, addiction, or misuse
hydrocodone	It binds and activates the mu-opioid receptor in the CNS and possesses analgesic and antitussive effects	Do not breastfeed Can cause life-threatening withdrawal symptoms
ketorolac	Inhibition of prostaglandin synthesis by competitive	Dosage should be adjusted for clients over age of 65 as can cause

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	<b>blocking of the enzyme cyclooxygenase</b>	<b>Steven-Johnson syndrome</b>
Hepatitis B vaccine	<b>Cause body to produce its own protection (antibodies) against the disease</b>	<b>Encourage rest, adequate intake, and eating small, frequent meals to prevent nausea</b>
Erythromycin eye ointment	<b>Inhibition of protein synthesis by binding to the 23s ribosome rna molecule in the 50s subunit of ribosomes</b>	<b>Observe for allergic reactions to erythema</b> <b>Observe for s/s of renal, hepatic and hematological dysfunction</b>
Phytonadione	<b>Acts as a cofactor to an enzyme found in the liver called gamma glutamyl-carboxylase</b>	<b>Monitor fo erythema and skin rash</b> <b>Check liver enzymes</b> <b>Tell doctor if you become pregnant</b>
Prenatal vitamins	<b>Help prevent neural tube defects</b>	<b>Avoid taking extra prenatal vitamins, as can become harmful</b>
MMR vaccine	<b>Inducing immune response in the body, thus providing long-term protection</b>	<b>A child to be educated on hand washing</b> <b>Discourage if planning to get pregnant</b>
Tetanus & reduced diphtheria toxoids/acellular pertussis vaccine	<b>A vaccine produces an active immune response of the body by developing antibodies and antitoxins against the toxids and acellular pertussis antigens</b>	<b>Breastfeeding is not a contraindication</b>
Lidocaine mucosal gel	<b>Stabilizes the neuronal membrane by inhibiting the ionic fluxes required for initiation and conduction of impulses, effecting the local anesthetic</b>	<b>Monitor BP and cardiac output</b> <b>Assess neurological and respiratory status frequently</b>