

MEDICATION REFERENCE LIST

OXYTOCIN (PITOCIN)

1. Classification: hormone
2. Physiologic Effect:
3. Major Indications:
 - 3.1. induction of labor in patients with a medical indication for the initiation of labor, such as Rh problems, maternal diabetes, preeclampsia at or near term, when delivery is in the best interests of mother and fetus or when membranes are prematurely ruptured and delivery is indicated
 - 3.2. stimulation or reinforcement of labor, as in selected cases of uterine inertia
 - 3.3. adjunctive therapy in the management of incomplete or inevitable abortion
 - 3.4. to control postpartum bleeding or hemorrhage
4. Primary Contraindications:
 - 4.1. cephalopelvic disproportion
 - 4.2. unfavorable fetal positions or presentations, such as transverse lies, which are undeliverable without conversion prior to delivery;
 - 4.3. In obstetrical emergencies where the benefit-to-risk ratio for either the fetus or the mother favors surgical intervention;
 - 4.4. In fetal distress where delivery is not imminent;
 - 4.5. where adequate uterine activity fails to achieve satisfactory progress;
 - 4.6. where the uterus is already hyperactive or hypertonic;
 - 4.7. In cases where vaginal delivery is contraindicated, such as invasive cervical carcinoma, active herpes genitalis, total placenta previa, vasa previa, and cord presentation or prolapse of the cord;
 - 4.8. hypersensitivity to the drug.
5. Side Effects:
 - 5.1. nausea
 - 5.2. vomiting
 - 5.3. more intense or abrupt contractions of the uterus.
6. Additional information:
 - 6.1. Usual dosing: IV Infusion
 - 6.1.1. Initial: 0.5-1 mU/min (equal to 3-6mL of dilute oxytocin sol per hr)
 - 6.1.2. Titrate: Gradually increase dose in increments of 1-2 mU/min every 30-60 min until desired contraction pattern is established