



**CULLMAN**  
REGIONAL

## PHYSICIAN'S ORDERS

NAME:  
ROOM NO:  
(ADDRESS)  
HOSP. NO.  
PHYSICIAN

Another brand of drug identical in form and content may be dispensed unless checked. ☐

### Severe Hypertension Pre-eclampsia Order Set

#### LAB:

- CBC, CMP
- ☐ Type and Screen
- ☐ Fibrinogen
- ☐ PT, PTT, INR
- ☐ UA Dip Only Iris

**IV FLUIDS:** Start IV ☐ LR ☐ NS @ KVO rate

#### MEDICATIONS:

- ☐ Labetalol 10 mg IV x 1
- ☐ Labetalol 20 mg IV x1
- ☐ Labetalol 20-80 mg every 10-30 minutes to a maximum cumulative dosage of 300 mg (start with 20 mg IV every 30 minutes and increase dose to keep Systolic BP < 160 and/or Diastolic BP < 110)

\*\*\* **IM if no IV present** \*\*\*

- ☐ Hydralazine 5 mg IV x 1

\*\*\* **IM if no IV present** \*\*\*

- ☐ Hydralazine 5-10 mg IV every 20-40 minutes to a maximum cumulative dosage of 20 mg (start with 5 mg every 40 minutes and increase dose to keep Systolic BP < 160 and/or Diastolic BP < 110)
- ☐ Nifedipine 10 mg Po x 1; repeat in 20 minutes if Systolic BP  $\geq$  160 and/or Diastolic BP > 110
- ☐ Nifedipine 20 mg Po x1; repeat in 20 minutes if Systolic BP  $\geq$  160 and/or Diastolic BP > 110
- ☐ Nifedipine 10-20 mg Po every 2-6 hours to a maximum daily dose of 180 mg (start with 10 mg every 6 hours and increase dose to keep Systolic BP < 160 and/or Diastolic BP < 110)

#### NURSING CARE:

- Continuous external fetal monitor appropriate for gestation
- Seizure precautions
- Lateral decubitus position
- VTE prophylaxis
- Urinary catheter/Urometer
- Once blood pressure is controlled (<160/110), measure blood pressure every 10 minutes/hour, every 15 minutes/hour, every 30 minutes/hour, then every 4 hours

**MD Signature:** \_\_\_\_\_ **Date & Time:** \_\_\_\_\_

Cullman Regional

Please use Ball Point Pen ONLY

Physician's Orders

**DO NOT USE:** U IU QD QOD MS MSO4 MgSO4