



Regional Pre-Printed Orders for NAUSEA and VOMITING of PREGNANCY Outpatient and Emergency Room



Form ID: DRDO103709D

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DRUG & FOOD ALLERGIES

• **Mandatory** **Optional: Prescriber check (✓) to initiate, cross out and initial any orders not indicated.**

- Patient weight _____ kg
- Urine dipstick for ketones
- Lab work: CBC, electrolytes, urea, creatinine, ALT, TSH
- Obstetrical ultrasound (if not yet done)

Intravenous

- If able to tolerate rapid infusion (**no underlying health conditions contraindicating rapid rate**):
 - Bolus of 1 L **ringers lactate** over one hour, then reduce rate to 400 mL/h for total of 2000 mL **OR**
 - _____
- Saline lock IV after 2 L intravenous solution is absorbed if referred to Nausea and Vomiting Clinic

Medications (See back page for treatment algorithm):

- Discontinue oral **prenatal vitamins and iron**
- **folic acid** 1 mg PO daily
- Add **multivitamin** (MULTI-12 EQUIV) IV into second litre of **ringers lactate**
- doxylamine-pyridoxine long acting 10 mg-10 mg tab (DICLECTIN EQUIV)** one tablet PO in the morning, one tablet in the afternoon, and two tablets before bed **OR**
- doxylamine-pyridoxine long acting 10 mg-10 mg tab (DICLECTIN EQUIV)** one tablet PO in the morning and at dinner time and two tablets at lunch time and before bed
- dimenhydrinate** 50 mg IV/PO/rectal Q4H PRN
- ranitidine** 50 mg IV Q8H PRN **OR**
- ranitidine** 150 mg PO BID for heartburn
- **polyethylene glycol** (PEG 3350) 17 grams (dissolve powder in one cup of fluid) PO once daily PRN to prevent or treat constipation
- Additional order(s) _____

Follow-up for women treated in Emergency Room or Perinatal Assessment Room:

- Admit to perinatal unit
- Discharge home when 2 L of IV solution absorbed
 - Ensure patient has adequate supply of medications for at home (may require prescription)
- Refer to Nausea and Vomiting Clinic by faxing this order sheet, patient's face sheet (if in hospital), and antenatal history and physical to:
 - Abbotsford Regional Hospital (Fax: 604-851-4818)
 - Royal Columbian Hospital (Fax: 604-520-4183)
 - Jim Pattison Outpatient Care and Surgery Centre [Surrey] Fax: (604-582-3798)

Nausea and Vomiting of Pregnancy Clinic additional orders

- Weigh on first visit and weekly thereafter (record pre-pregnant body mass index [BMI] in chart)
- Daily urine dipstick for ketones
- CBC, electrolytes, urea, creatinine, ALT, TSH on first visit, weekly, and if symptoms worsen
- Obstetrical ultrasound (if not yet done)
- MOTHERISK PUQE-24 scoring system daily
- Saline lock IV

| Date (dd/mm/yyyy) | Time | Prescriber Signature | Printed Name <u>and</u> College ID# |
|-------------------|------|----------------------|-------------------------------------|
| | | | |

Treatment of Nausea and Vomiting of Pregnancy Algorithm

If no improvement, proceed to next step

Discontinue oral **prenatal vitamins** and iron
Give **folic acid** 1 mg PO once daily

Start **doxylamine-pyridoxine long acting 10 mg-10 mg tab (DICLECTIN EQUIV)**

Typical starting dose: one tablet orally in the morning and afternoon, and two tablets orally before bed

Titrate dose up to 8 tablets a day and adjust schedule according to severity of symptoms

Note: **DICLECTIN EQUIV** is a delayed release tablet; administer regularly to improve efficacy

No dehydration

Dehydration

- **dimenhydrinate** 50 mg orally or rectally 1 hour before **DICLECTIN EQUIV** doses OR 50 mg orally or rectally Q6H (may increase up to Q4H regularly)
- **ranitidine** 150 mg PO BID

- IV rehydration
- **multivitamin** IV supplementation once daily
- **dimenhydrinate** 50 mg IV Q6H (may increase up to Q4H regularly)
- **ranitidine** 50 mg IV Q8H

Add

- **metoclopramide** 10 mg PO Q8H

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Add

- **ondansetron** 8 mg PO Q12H PRN OR 4 mg PO Q8H PRN
(stop **metoclopramide** if previously given)

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- **ondansetron** 8 mg IV Q12H PRN OR 4 mg IV Q8H PRN
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- Bowel Care
 - o If able to tolerate oral fluids give **polyethylene glycol** (PEG 3350)
 - o glycerin adult suppository
- Consider DVT prophylaxis while in hospital
- Inpatients: in preparation for discharge from hospital, gradually change each IV medication to oral dose and route

Add

- **methylprednisolone** 15 to 20 mg IV Q8H PRN for up to 24 h