NURSING

REMINDER: Clinical Instructions include step by step instructions related to the administration of Terbutaline for fetal intolerance. All nursing orders and medications given require an actual order as listed below.

STP-970 Clinical Instructions:

-Nursing Interventions – Initiate procedure if maternal heart rate less than 120 bpm and patient assessment reveals fetal intolerance as evidenced by prolonged fetal heart rate decelerations

-Maternal Fetal Testing
- Reposition patient side to side.
- Sterile vaginal exam, as appropriate
- Administer Terbutaline (Brethine) 0.25 mg SubQ x 1 dose Prn; document “per standardized procedure.”
- Notify physician after administration and obtain further orders.
- Continue to monitor fetus and uterine activity.
- Prepare for possible transfer to Labor & Delivery
- Provide cultural and age-related support to patient and family

-Labor & Delivery
- Reposition patient side to side.
- Administer mainline IV fluid bolus up to 300 mL
- 02 @ 8L/min by tight face mask
- Sterile vaginal exam, as appropriate
- Turn Oxytocin (Pitocin) off, if infusing.
- Review tracing with clinical coordinator or relief clinical coordinator.
- Administer Terbutaline (Brethine) 0.25 mg SubQ x 1 dose Prn; document “per standardized procedure.”
- Notify physician after administration and obtain further orders.
- Continue to monitor fetus and uterine activity.
- Assess/prepare for imminent delivery, as appropriate
- Provide cultural and age-related support to patient and family

Document the following:
1. Assessment of patient.
2. Description of deceleration and sequence of events.
3. All nursing interventions utilized (including Terbutaline given per standardized procedure), maternal and fetal response to interventions.
4. Notification of physician and any orders received.
5. All nursing interventions and patient response.

RESPIRATORY
- Apply Oxygen (02) with defined parameters: at 8L/min by tight face mask

IV FLUIDS (For Labor & Delivery use only)
- Lactated Ringers IV to run at 999 mL/Hr up to 300 mL per protocol (STP 970).
- Sodium Chloride 0.9% IV to run at 999 mL/Hr up to 300 mL per protocol (STP 970).

MEDICATIONS
- Terbutaline (Brethine) 0.25 mg SubQ Prn severe or sustained deceleration of fetal heart rate per protocol (STP 970). Hold if maternal HR > 120.