

Drug Information Table

Oxytocin – oxytocin (Pitocin)

Therapeutic Use	Administration	
<ul style="list-style-type: none"> • Uterine stimulation • Induction or enhancement of labor near or post term • Treatment of postpartum hemorrhage 	<ul style="list-style-type: none"> • Administer IV via infusion pump. • Gradually increase the flow rate by 1 to 2 milliunits/min every 30 to 60 min until contractions last 1 min or less every 2 to 3 min. • Monitor blood pressure and pulse rate. • Monitor for uterine hyperstimulation (contractions lasting longer than 60 seconds, occurring more frequently than every 2 to 3 min, resting uterine pressure greater than 15 to 20 mm Hg). Stop the infusion and report hyperstimulation immediately. • Monitor fetal heart rate and rhythm, and report signs of fetal distress. • Stop the infusion for serious alterations in fetal heart rate or rhythm. 	
Side/Adverse Effects	Interventions	Patient Instructions
<ul style="list-style-type: none"> • Uterine hyperstimulation 	<ul style="list-style-type: none"> • Monitor risk factors such as multiple deliveries. • Monitor length, strength, and duration of contractions. • For indications of hyperstimulation, turn patients on their side, stop the infusion, and administer oxygen. • Be prepared to administer a uterine relaxant. 	<ul style="list-style-type: none"> • Report increasing duration or strength of contractions.
<ul style="list-style-type: none"> • Hypertensive crisis 	<ul style="list-style-type: none"> • Monitor for headache, nausea, vomiting, and increasing blood pressure. 	<ul style="list-style-type: none"> • Report headache, palpitations, nausea, or chest pain.
<ul style="list-style-type: none"> • Water intoxication (rare at therapeutic doses) 	<ul style="list-style-type: none"> • Monitor intake and output and level of consciousness. 	<ul style="list-style-type: none"> • Report drowsiness or headache.
Contraindications	Precautions	Interactions
<ul style="list-style-type: none"> • Unripe cervix • Placental abnormalities • Active genital herpes • Uterine surgery • Fetal distress • Lung immaturity • Cephalopelvic disproportion • Malpresentation • Prolapsed umbilical cord 	<ul style="list-style-type: none"> • Pre-eclampsia/hypertension • Multiparity (multiple fetuses) • Seizures • Polyhydramnios • Cardiac disease 	<ul style="list-style-type: none"> • Vasopressors, ephedra, and ma huang can cause hypertension. • Cyclopropane anesthesia causes hypotension, bradycardia, and dysrhythmias.