Drug Information Table Synthetic prostaglandins – dinoprostone vaginal insert (Cervidil) or gel (Prepidil) Administration **Therapeutic Use** Promotion of cervical ripening Gel: prior to labor indiction · Have patients void prior to Stimulation of uterine insertion. Administer intracervically using contractions after cervical ripening a syringe prefilled with the drug in gel form and an endocervical catheter. Have patients lie supine during instillation and remain supine for 30 min. • Repeat dosing every 6 hr, twice, if the desired therapeutic effect has not occurred. · Monitor uterine activity and fetal heart rate. Monitor 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). Report hyperstimulation immediately. Begin oxytocin 6 to 12 hr after the last dose. Vaginal insert: Have patients void prior to insertion. Insert the pouch containing the drug into the posterior fornix of the vagina. Have patients lie supine for 2 hr while the pouch gradually releases the drug. Remove the pouch using the attached tape when active labor begins or 12 hr later. Follow the monitoring precautions listed above. Side/Adverse Effects **Patient Instructions** Interventions Monitor risk factors such as • Report increasing duration or Uterine hyperstimulation multiple deliveries. strength of contractions. · Monitor length, strength, and duration of contractions. · For indications of hyperstimulation, turn patients on her side, remove the pouch (if it is used), and administer oxygen. Be prepared to administer a uterine relaxant. · Report nausea, vomiting, and Nausea, vomiting, diarrhea Monitor for nausea, vomiting, diarrhea. and diarrhea. • For patients who develop these · Increase clear fluid intake as symptoms, pretreat subsequent needed. doses of gel with antidiarrheal and antiemetic agents. Maintain hydration. · Report fever. Fever Monitor temperature. Inform patients that fever is an expected response within 15 to 45 min after instillation and resolves within 2 to 4 hr after the therapy ends. Contraindications Interactions **Precautions** Hypo- or hypertension Acute pelvic inflammatory Oxytocic agents increase the disease Asthma risk of uterine hyperstimulation. Active cardiac disease · Diabetes mellitus Active lung disease Uterine scarring from previous · Liver or kidney impairment cesarean section Fetal malpresentation Seizure Nonreassuring fetal heart rate Glaucoma pattern

Uterine scarring from previous

surgery