

# Preterm Labor

- ABCs
- Obtain Maternal History
- Detailed Maternal Assessment
- Obtain IV access and start LR @ 125 ml/hr

At risk of immedite delivery ?

Yes

- Prepare for delivery – Place on Left side
- Prepare for resuscitation of preterm infant
- See Childbirth Protocol
- Contact Medical Control

No

Maternal pulse > 120 bpm ?

Yes

Use alternative tocolytics to slow contractions.  
**Magnesium Sulfate 4-6 grams IV bolus over 30 minutes and then continuous infusion per Magnesium Sulfate Protocol**  
 or  
**Nifedipine 10 mg PO q 20 minutes apart for a total of three doses. ① ②**

No

Administer **Terbutaline 0.25 mg SQ**. May repeat q 30 minutes if maternal pulse remains below 120. ③

Contractions continue ?

Yes

Use alternative tocolytics to slow contractions  
**Magnesium Sulfate 4-6 grams IV bolus over 30 minutes and then continuous infusion per Magnesium Sulfate Protocol**  
 or  
**Nifedipine 10 mg PO q 20 minutes apart for a total of three doses.**

- Transport per High- Risk OB Protocol
  - Monitor Fetal Heart tones
  - Palpate uterine activity and fetal movement ④ ⑤ ⑥

Preterm Labor is defined as:

1. Between 20 – 36 weeks gestation
2. Uterine Contraction ( > 3 in 30 minutes)
3. Presence of cervical changes

Maternal History includes:

- \* gestation age,
- \* Gravida/ Para
- \* Membrane status
- \* Previous Preterm Labor
- \* Infection signs and symptoms
- \* Previous uterine surgery

Maternal Assessment includes:

- \* Vital Signs
- \* Fluid Status
- \* Fetal Heart Tones
- \* Toco Monitor interpretation
- \* Labor pattern
- \* Fundal Height
- \* Cervical exam if appropriate

Do Not Transport with recent cervical changes within 30 min - 60 min time period and contracting regularly.

1. Tocolytic effect of **Nifedipine** is not appreciated clinically immediately, and may not occur for 2 – 4 hours after administration. Consider the use of **Terbutaline** until the **Nifedipine** becomes fully effective.

2. Do not administer both **Magnesium Sulfate** and **Nifedipine** together without consulting Medical Control

3. Do not use **Terbutaline** if patient is diabetic or has a history of cardiac disease.

4. May give **Zofran 4 mg IV over 1 minute**, for nausea and vomiting.

5. If pain medication is required use **Morphine 1 – 2 mg IV over 1 minute** or **Fentanyl 50 mcg IV over 1 minute**.

6. Consider administration of **bethamethasone 12 mg IM** prior to transport if less than 34 weeks gestation.