



**ADULT OBSTETRICAL
OB-03**

PRE-ECLAMPSIA/ TOXEMIA

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Last Revision:
12-5-2018

History and Physical:

Historical Findings	Physical Findings
<ul style="list-style-type: none">Gravid female with intra-uterine pregnancy with greater than 20 weeks gestation	<ul style="list-style-type: none">Persistent hypertension of systolic of > 140 and/or diastolic of > 90One or more of<ul style="list-style-type: none">Peripheral edemaNausea/vomitingHeadache

Assessment:

- OB Assessment
- Differential Diagnoses: HTN Emergency, Pre-Eclampsia, Intracranial Hemorrhage

Clinical Management Options:

Interventions	Pharmacology
<ul style="list-style-type: none">Oxygen therapy as appropriateVascular AccessPlace patient in left lateral recumbent position	<ul style="list-style-type: none">Nausea/Vomiting ManagementMagnesium sulfate 2 G infusion<ul style="list-style-type: none">Mix 2 G in 100 ml NS and infuse over 10 minutes using pumpMay be repeated x 1Labetalol 10 mg SLOW IV/IO<ul style="list-style-type: none">If hypertension persists refractory to magnesium sulfate

Considerations:

- Outside sensory stimulation should be minimal