



**Birth Unit Admission Orders**  
**HIGH ALERT**

Patient: \_\_\_\_\_

Alert Record Reviewed       No Allergies Known

Allergies-Adverse Reactions-Cautions: \_\_\_\_\_

Age \_\_\_\_\_ Patient's Weight \_\_\_\_\_ kg      Date of Patient's Weight \_\_\_\_\_

Items preceded by a **bullet (●)** are active orders. Items preceded by a **checkbox (☐)** are only actioned if checked

**DIET**

Clear Fluid     DAT     NPO

**INVESTIGATIONS**

CBC     Hold Specimen / Group and Screen     AST, ALT, Cr, Uric Acid, LDH

INRPT and PTT       Other \_\_\_\_\_

***Neisseria Gonorrhoeae (GC) Risk Assessment***

**Check one of the following:**

<input type="checkbox"/> No prenatal GC testing documented	<b>GC Test</b>
<input type="checkbox"/> Negative GC test result, but patient deemed at high risk of acquiring GC following test	
<input type="checkbox"/> Positive GC test result, treated and no follow-up test of cure	
<input type="checkbox"/> Negative GC test result and low risk of acquiring GC following test	<b>No GC Test indicated</b>
<input type="checkbox"/> Positive GC test result and not treated	<b>Treatment Indicated</b>

**CONSULTS**

Anaesthesia for  Epidural     Other indications (e.g. obesity, PCA) \_\_\_\_\_

**FLUIDS**

IV \_\_\_\_\_ at \_\_\_\_\_ mL/hour

**BLADDER CARE**

- In and Out urethral catheterization PRN

**MEDICATIONS**

*Analgesics*

- Nitrous oxide inhalation PRN
- acetaminophen 500 to 1000 mg PO q4h PRN (to a maximum of 4 grams/24 hours)
- morphine** 10 to 15 mg IM x 1 dose PRN
- fentaNYL** IV See Form ID IWKIVFE

*Gastrointestinal Care*

- dimenhyDRINATE 25 to 50 mg IM/IV q4h PRN for nausea/vomiting
- metoclopramide 10 mg PO/IV q6h PRN for nausea/vomiting
- sodium citrate/citrate acid solution 30 mL PO q6h PRN
- famotidine 20 mg PO/IV BID PRN for gastroesophageal reflux

*Antimicrobials* (Indicated when Group B Streptococcus status is positive or unknown)

- No known penicillin allergy: Penicillin G 5 million units IV once, then 2.5 million units IV q4h until delivery
- Penicillin allergy: ceFAZolin 2 grams IV, then 1 gram IV q8h until delivery
- ceFAZolin allergy and a susceptible isolate: clindamycin 900 mg IV q8h until delivery

*Uretotonics*

**oxytocin** for Augmentation/Induction of Labour (Form ID IWKOXIN)

*Postpartum Hemorrhage Prophylaxis at delivery:*

- **oxytocin** 3 units IV x 1 dose OR 10 units IM x 1 dose after delivery of the anterior shoulder
- If high risk for postpartum hemorrhage: tranexamic acid 1000 mg IV x 1 dose as soon as possible after birth

DATE (yyyy/MON/dd)    Time (24hr/hh:mm)    Prescriber Signature    Printed Surname/Registration#

DATE (yyyy/MON/dd)    Time (24hr/hh:mm)    Verified By (Nurse Signature)    Printed Surname  
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