

REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME

oxytocin

(labour induction/augmentation)



Effective Date: Sept. 2012 CLASSIFICATION OTHER NAMES PAGE

Oxytocic Syntocinon

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ADMINISTRATION POLICY:

IV Infusion - Restricted to nurses in Obstetrics who have received education in oxytocin administration for

labour induction/augmentation

RECONSTITUTION/DILUTION/ADMINISTRATION:

Available as: 10 units/mL - 1 mL ampoule

IV infusion: Dilute 30 units (3 mL) in 500 mL normal saline

Final volume: 503 mL Final concentration: 0.06 units/mL

IV Infusion: Pump Library:

Drug Library	Dose Rate	Short Name	Care Unit
Yes	mL/h	oxytocin	General

All oxytocin infusions must be controlled by an infusion pump.

DOSAGE: Refer to titration dosing table below

Usual: Initiate infusion at 1 to 4 milliunit/min according to SOGC dosing protocol

Rate of infusion to be increased every 30 minutes until contraction are evident

Grand multiparity: Initiate at 0.3 mL/hour (0.3 milliunits/minute)

Maximum dose: 25 milliunits/minute (unless higher dose specifically ordered by physician)

Maximum concentration: 60 milliunits/mL

STABILITY/COMPATIBILITY:

Stability of Final Admixture: 24 hours at room temperature

Compatibility: Compatible with normal saline, combination dextrose-saline solutions,

Lactated Ringer

Compatible with D5W (not recommended due to increased potential for maternal

hyponatremia)

PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:

- Uterine hyperstimulation
- Water intoxication: Headache, nausea, vomiting, mental confusion, decreased urinary output, decreased blood pressure, increased heart rate and arrhythmias
- Uterine rupture: Abdominal pain, hypotension, tachycardia, increased vaginal bleeding, shock

ADDITIONAL NOTES AND NURSING CONSIDERATIONS:

- Dosages of oxytocin above 20 milliunits/minute over a prolonged period (more than 24 hours) can lead to water intoxication. In situations of gestational hypertension with proteinuria, water intoxication can occur earlier.
- Grand multiparous patients will have their oxytocin initiated at 0.3 milliunits/minute. They will have their oxytocin infusion increased by 1 milliunit/minute every 30 minutes thereby **NOT** exceeding an increase of 2 milliunits per minute every hour.
- If the infusion is stopped it may be started again, within 30 minutes, at half the previous dosage. If it has been more than 30 minutes, the infusion should be initiated at the beginning dose.



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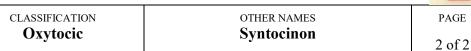
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oxytocin IV infusion dosing table

Note: A pump infusion rate of 1 mL/hour equals 1 milliunit/minute

30 units in 500 mL normal saline		
milliunits/minute	mL/hour	
0.3	0.3	
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10	10	
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Requires further	physician orders	
26	26	
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31 31		
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