Appendix R: Medications for Postpartum Hemorrhage

Medications for Postpartum Hemorrhage						
Drug	Dose	Route	Frequency	Side Effects	Contraindications	Special Storage Considerations
Oxytocin (Pitocin™) 10 units/mL	10-40 units per 500-1000 mL, rate titrated to uterine tone	IV infusion	Continuous	Usually none Nausea, vomiting, hyponatremia ("water intoxication") with prolonged IV admin. ↓ BP and ↑ HR with high doses, especially IV push	Hypersensitivity to drug	None
Methyler- gonovine (Methergine®) 0.2 mg/mL	0.2 mg	IM (<u>not</u> given IV)	-q2-4 hours -If no response after first dose, it is unlikely that additional doses will be of benefit	Nausea, vomiting, severe hypertension, especially with rapid administration or in patients with HTN	Hypertension, Preeclampsia, Heart disease Hypersensitivity to drug Caution if multiple doses of ephedrine have been used, may exaggerate hypertensive response w/ possible cerebral hemorrhage	Refrigerate Protect from light
Carboprost (Hemabate®) (15-methyl PG F2a) 250 mcg/mL	250 mcg	IM or intra- myometrial (<u>not</u> given IV)	-q15-90 min -If no response after 3 doses, it is unlikely that additional doses will be of benefit	Nausea, vomiting, diarrhea, fever (transient), headache, chills, shivering, hypertension, bronchospasm	Caution in women with hepatic disease, asthma, hypertension, active cardiac or pulmonary disease Hypersensitivity to drug	Refrigerate
Misoprostol (Cytotec®) 100 or 200 mcg tablets	600-800 mcg	SL or PO	One time	Nausea, vomiting, diarrhea, shivering, fever (transient), headache	Rare Known allergy to prostaglandin Hypersensitivity to drug	None
Tranexamic Acid (TXA)	1 gram	IV infusion (over 10 min)	-One dose within 3 hrs of hemorrhage recognition -A 2nd dose may be administered if bleeding continues after 30 min or if bleeding stops and then restarts within 24 hrs of completing the 1st dose	Nausea, vomiting, diarrhea, hypotension if given too rapidly	A known thromboembolic event in pregnancy History of coagulopathy Active intravascular clotting	None