| Medications for Postpartum Hemorrhage | | | | | | |
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| **Drug** | **Dose** | **Route** | **Frequency** | **Side Effects** | **Contraindications** | **Special Storage** |
| **Oxytocin (Pitocin) 10 units/mL** <br><br> HIGH Alert Drug **Safe Handling Required. | 10 – 40 units per 500-1000 mL, rate titrated | IV infusion | Continuous | N/V, hyponatremia with prolonged IV admin, hypotension and increased heart rate with higher doses | Hypersensitivity to drug | None |
| **Methylergonovine (Methergine) 0.2 mg/mL** <br><br> HIGH Alert Drug **Safe Handling Required. | 0.2 mg | IM only (not given IV) | q2-4 hours; if no response after 1st dose, it is unlikely that additional doses will be of benefit | N/V, severe HTN, especially with rapid administration or in patients with HTN | HTN, preeclampsia, heart disease, hypersensitivity to drug <br><br> **Caution** if multiple doses of ephedrine have been used, may exaggerate HTN response with possible cerebral hemorrhage | Refrigerate <br><br> Protect from Light |
| **Carboprost (Hemabate) 250 mcg/mL** <br><br> **Safe Handling Recommended. | 250 mcg | IM only (not given IV) | q15-90 mins; max total dose 2 mg <br><br> If no response after 3 doses, it is unlikely that additional doses will be of benefit | N/V, diarrhea, fever (transient), HA, chills, shivering, HTN, bronchospasm | Caution with hepatic disease, asthma, HTN, active cardiac or pulmonary disease, hypersensitivity to drug | Refrigerate |
| **Misoprostol (Cytotec) 100 mcg tablet** <br><br> HIGH Alert Drug **Safe Handling Required. | 600 – 1000 mcg | SL, PO, PR | Once | N/V, diarrhea, shivering, fever (transient), HA | Rare to known allergy to prostaglandin, hypersensitivity to drug | None |
| **Tranexamic Acid (TXA) 1000 mg/10 mL** | 1 gram in 50 mL NS | IV infusion | One dose within 3 hours of hemorrhage recognition <br><br> A 2nd dose may be administered if bleeding continues after 30 mins or if bleeding stops and then restarts within 24 hours of completing 1st dose. | N/V, diarrhea, hypotension if given too rapidly | A known thromboembolic event in pregnancy, history of coagulopathy, active intravascular clotting | None |

Reviewed by OB/GYN Committee 01/2023; P&T 02/2023

**Safe Handling Required – Refer to Hazardous Drug policies.

**Iredell** HEALTH SYSTEM