Antihypertensive agents in Preeclampsia

Treated sustained SBP>160 and/or
dBP>110 (sustained = BP confirmed >
15 minutes)

* Labetalol: effects seen within 1 – 2
minutes (max. effect 5 – 10 minutes)
  • Give 20 mg IV slow IVP, repeat BP
    10 minutes
  • If BP > 160/110, give 40 mg IV
    slow IVP, repeat in 10 minutes
  • If BP > 160/110, give 80 mg IV
    slow IVP and repeat BP in 10
    minutes (up to total 3 doses
    every 10 minutes)

Maximum IV dose Labetalol= 300 mg in
24 hours
Patient must be on continuous pulse
ox. for minimum 1 hour after IV
Labetalol

* Hydralazine: Effects seen within
5 – 50 minutes (maximum effects 20 –
30 minutes)
  • Give 5 – 10 mg IV slow IVP q 20
    minutes
Maximum IV DOSE Hydralazine = 25 mg
in 24 hours

* Procardia: effects seen within 10
minutes (max. effects 60 minutes)
  • 10 mg PO every 20 minutes
    (option if patient has no IV
    access)
Maximum 60 mg PO
If no response to initial agent → switch
agents!

©Franciscan Health

After PRN medication

<table>
<thead>
<tr>
<th>Blood Pressure Cycles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every 10 minutes x 1 hour</td>
</tr>
<tr>
<td>Every 15 minutes x 1 hour</td>
</tr>
<tr>
<td>Every 30 minutes x 1 hour</td>
</tr>
<tr>
<td>Every 4 hours</td>
</tr>
</tbody>
</table>

***A scheduled medication is not an acceptable PRN medication***

Blood Pressure Ranges

Postpartum patient: SBP > 150
mmHg OR DBP > 100 mmHg

Severe Range:
> 160 mmHg and/or > 110 mmHg

When does a Medication dose considered effective?

Medication is effective after the first
hour of blood pressures if they fall
under call orders.

After the first hour after a medication
has been given:
the blood pressure spikes → give
medication that was effective

©Franciscan Health