Immediate-Release Oral Nifedipine Algorithm Example

Trigger: If severe elevations (SBP ≥160 or DBP ≥ 110) persist* for 15 min or more **OR** If two severe elevations are obtained within 15 min and tx is clinically indicated

Immediate-Release Oral nifedipine§ 10 mg



Repeat BP in 20 minutes



If SBP \geq 160 or DBP \geq 110. administer oral nifedipine 20 mg; If below threshold, continue to monitor BP closely



Repeat BP in 20 minutes



If SBP >/=160 or DBP >/=110, give additional round of oral nifedipine 20 mg



Repeat BP in 20 minutes



If SBP > 160 or DBP \geq 110. administer IV labetalol† 20 mg.



If either BP threshold is still exceeded, administer labetalol (20mg IV for more than 2 minutes) and obtain emergency consultation from maternal-fetal medicine, internal medicine, anesthesia, or critical care subspecialists.



If SBP >/=160 or DBP >/=110, give additional antihypertensive medication per specific order as recommended by specialist Obtain emergency consultation from specialist in MFM, internal medicine, anesthesiology, or critical care.



Once BP thresholds are achieved. repeat BP:



- Every 10 minutes for 1 hour
- Then every 15 minutes for 1 hour
- Then every 30 minutes for 1 hour
- Then every hour for 4 hours



Institute additional BP monitoring per specific order

- Notify provider after one severe BP value is obtained
- Institute fetal surveillance if viable
- Capsules should be administered orally and not punctured or otherwise administered sublingually
- There may be adverse effects and contraindications. Clinical judgement should prevail.

- * "Active asthma" is defined as:
- (A) symptoms at least once a week, or
- (B) use of an inhaler, corticosteroids for asthma during the pregnancy, or
- (c) any history of intubation or hospitalization for asthma.

Safe Motherhood Initiative



^{*} Two severe readings more than 15 minutes and less than 60 minutes apart

[§] Immediate-release oral nifedipine has been associated with an increase in maternal heart rate and may overshoot hypotension.

[†] Avoid parenteral labetalol with active[‡] asthma, heart disease, or congestive heart failure; use with caution with history of asthma. May cause neonatal bradycardia.