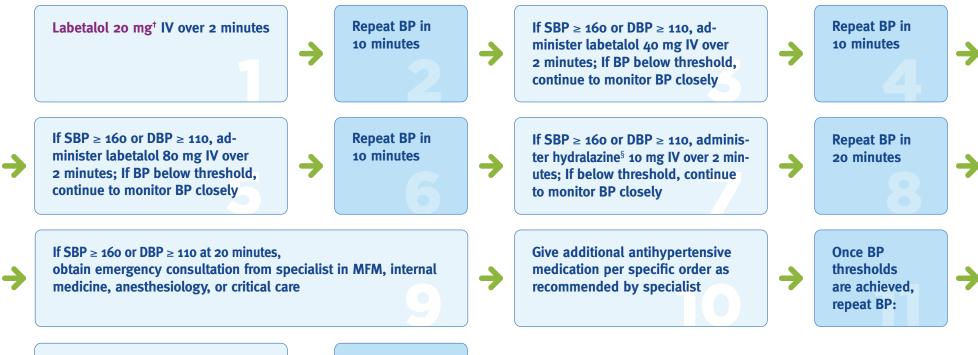
Labetalol Algorithm

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





- 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



- Institute fetal surveillance if viable
- Hold IV labetalol for maternal pulse under 60
- Maximum cumulative IV-administered dose of labetalol should not exceed 300 mg in 24 hours
- There may be adverse effects and contraindications. Clinical judgement should prevail.

- * Two severe readings more than 15 minutes and less than 60 minutes apart
- [†] Avoid parenteral labetalol with active[‡] asthma, heart disease, or congestive heart failure; use with caution with history of asthma. May cause neonatal bradycardia.
- [‡] "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
- © any history of intubation or hospitalization for asthma.

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[§] Hydralazine may increase risk of maternal hypotension.