

M16 - OXYTOCIN (SYNTOCINON)

MEDICATION STANDING ORDER

HIGH ALERT MEDICATION 1

Version date: 2023-12-13 Effective date: 2024-01-16 (0700)

INDICATIONS

- All post-partum patients will receive an IV or IM bolus
- Patients with ongoing significant blood loss after delivery should receive a continuous infusion in addition to the bolus dose

CONTRAINDICATIONS

- Multiple gestations before all fetuses are delivered
- Uterine inversion

ROUTE (WORK SCOPE)	INITIAL DOSE	REPEAT DOSE
INTRAMUSCULAR / INTRAVENOUS (PCP & ABOVE)	10 years & older – 10 units	None
INTRAOSSEOUS (ICP & ABOVE)		
CONTINUOUS INFUSION (PCP & ABOVE)	10 years & older - 10 units per hour x 4 hours ⁴	Not apllicable

NOTES

- 1. ERS HIGH-ALERT MEDICATION: Refer to Shared Health Provincial Clinical Standard Safety Controls for High-Alert Medications (refer to A03 HIGH ALERT MEDICATIONS).
- 2. Administer IV / IO by slow push over 2 minutes.
- 3. Use caution when administering IM if known bleeding disorder or anticoagulation is present.
- 4. Mix 40 units of oxytocin in one liter of normal saline & run at 250 ml/hr and administer with an infusion pump. If a pump is not available, ensure a drip-rate for 250 ml/hr.

APPROVED BY		
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VERSION CHANGES (refer to X08 for change tracking)

• Addition of Shared Health Provincial Clinical Standard for high-alert medications