

HIV - INTRAPARTUM Orders for Woman who is KNOWN HIV POSITIVE

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DATE ____/____/____ TIME _____
 DD MM YYYY

WEIGHT: _____ KG HEIGHT _____ CM

ALLERGY CAUTION sheet reviewed

Reminders

- ▶ **Prevention of Perinatal HIV Transmission kits containing required medications are located in Delivery Suite (ADC)**
- ▶ RN to fill in Maternal Information section on Prevention of Perinatal HIV Transmission Kit Reorder form
- ▶ Refer to HIV - Postpartum orders for Woman who is Known HIV Positive after delivery
- ▶ If woman is part of a research study follow study protocol

Patient Care

General Management of Labour

- ▶ **Universal precautions for blood and body fluid with eye protection and gloves**
- ▶ **Avoid artificial or prolonged rupture of membranes (ROM)**
- ▶ **Avoid fetal scalp electrodes, scalp sampling, intrauterine pressure catheter and assisted delivery unless benefit exceeds risk**
- ▶ **Epidural anesthesia is not contraindicated**
- ▶ **Cesarean section not of benefit for prevention of perinatal HIV transmission if in active labour or if there has been ROM**

Post-delivery

- ▶ **Avoid use of ergots (ergovine maleate) in management of postpartum hemorrhage if possible**
- ▶ **At delivery: Send cord gases and collect maternal and cord blood samples for research if enrolled in research study**
- ▶ **Send placenta to pathology and flag if in research study**

Medications

- ▶ **Continue antepartum oral antiretroviral therapy during active labour as written below and resume after delivery unless otherwise indicated.**
- ▶ Refer to prenatal records, woman's own medication supply or call Oak Tree Clinic (604-875-2250) for medication list
- _____
- _____
- _____
- _____
- ▶ **Initiate IV zidovudine immediately at ROM, onset of labour, or at least 2 hours prior to cesarean section**
- ▶ **If labour stops and zidovudine is discontinued for greater than 6 hours, re-administer loading dose and resume continuous infusion when labour recommences**
- ▶ **Refer to: IV zidovudine Preparation and Administration Protocol**
 - zidovudine _____ mg (2 mg/kg/dose) IV over 1 hour STAT once
 - zidovudine _____ mg/hour (1 mg/kg/h) IV continuous infusion until cord clamped
- ▶ **If woman DID NOT receive ANY antenatal antiretroviral therapy ALSO GIVE:**
 - nevirapine 200 mg PO once STAT

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IV Infusions

- Dextrose 5% in water, IV infuse at 125 mL/h

Laboratory

- Complete blood count (CBC) with differential
- Aspartate aminotransferase (AST)
- Alanine aminotransferase (ALT)
- Bilirubin, total unconjugated and conjugated
- Glucose, serum, random
- Creatinine (Cr), serum
- CD4 cell count, absolute (Send 4 mL in one EDTA tube (lavender top))
- HIV viral load (Diagnostic Virology & Reference Laboratory Requisition #PHC_L186-send 4 mL per tube in two EDTA tubes (lavender top))

▶ If unknown

- Hepatitis C virus (HCV) antibody IgG
- Hepatitis C virus (HCV), PCR
- Hepatitis B surface antigen (HBsAg)
- Syphilis EIA
- Rubella IgG
- Varicella-zoster virus (VZV) antibodies, IgG

Consults

- Level 1 Obstetrician
- Oak Tree Clinic 604-875-2250 (leave message after hours)

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