



CLINICAL PRACTICE GUIDELINE

Guideline coverage includes NICU KEMH, NICU PCH and NETS WA

Postnatal Midwifery Care: Prescribing and Giving Medications to Mothers of 3B Infants

This document should be read in conjunction with the [Disclaimer](#)

Aim

To provide appropriate and safe administration of medications to Postnatal Mothers admitted to NICU.

- All medications the mother will need during her stay should be ordered and dispensed by the referring hospital.
- NICU medical staff cannot prescribe medications for pre-existing conditions or postnatal complications. Mothers will need to be referred to their own doctor for ongoing treatment.
- Country mothers and mothers delivered at KEMH with postnatal complications can be reviewed by the KEMH Emergency Department.

3B Medical Staff may Prescribe the Following Medications Only:

Pain Relief

- Paracetamol 500 mg. 1-2 tablets, 4-6 hourly. No more than 8 in a 24 hour period.
- Tramadol 50 mg. 1-2 tablets, 4-6 hourly. No more than 8 in a 24 hour period.

Medications containing Codeine are not recommended for breastfeeding mothers.

Anti-Inflammatories

- Ibuprofen 200 mg. 1-2 tablets 6 hourly. No more than 6 in a 24 hour period.

Domperidone

Domperidone is used to enhance breast milk production and is for the benefit of the inpatient neonate. Therefore this drug can be prescribed for mothers that have a baby on the unit and are not inpatients themselves. However we would recommend mothers to see their own GP to ensure ongoing care.

Dose: 1 tablet (10 mg) 3 times daily for 2 to 4 weeks. If milk production does not improve a longer supply of Domperidone may be required.

For more information refer to Pharmacy and Medication Guidelines - [Domperidone](#) and Obstetrics and Gynaecology Guideline - [Breastfeeding: Increasing Breast Milk Supply](#).

Cabergoline

Cabergoline is used for rapid suppression of breast milk.

Dose: If lactation is not established give 2 x 500 microgram tablets in a single dose on day one. If lactation is established and suppression is required give half a tablet (250microgram) twice daily for 2 days, giving a total of 1mg.

For more information see Pharmacy and Medication Guidelines - [Cabergoline](#).

Suppression of breast milk without medication is often preferable. Refer to the Midwife for further information.

Methadone

Mothers requiring Methadone must obtain this from the medical methadone clinic. This is organised by the referring doctor prior to the mother being transferred.

Nurse / Midwife Initiated Medications

Refer to Pharmacy and Medication Guidelines - [Nurse / Midwife Initiated Medications](#).

Aim

To allow registered nurses and midwives to administer Schedule 2 and Schedule 3 medications without a prescription by medical staff.

Key Points

- The non-prescription drugs listed below may be administered by registered nurses and/or midwives without prior prescribing by medical staff.
- If the patient has received two doses of the medication, a medical officer MUST review the patient if a third dose is required.
- All nurse/ midwife initiated medication administered must be documented in the appropriate section of the medication chart (MR 810).
 - Liquid Paraffin (Agarol®).
 - Cepacol lozengers.
 - Fibre supplements.
 - Glycerine suppositories.
 - Lactulose.
 - Microlax enemas.
 - Nicotine Replacement Therapy.
 - Paracetamol.
 - Peppermint water.
 - Rectinol® cream and suppositories.
 - Any non-prescription (S2 and S3) topical preparations.

Anti D Immunoglobulin

See [Postnatal Midwifery Care](#) guideline.

How to Dispense Drugs

Self Medication (Recommended)



Mothers receive a prescription supply of drugs which they can self-administer as directed. Medications should be prescribed by the doctor on the PBS discharge prescription with the mother's details (name, UR and DOB). This can be dispensed by the hospital Dispensary or a local Pharmacy. This can then be given directly to the mother after ensuring the mother understands the administration instructions.

Ward Dispensing

In exceptional circumstances if there are concerns about compliance or the ability of the mother to self-administer medication, the medication can be prescribed on an adult medication chart (as above). Medications must then be administered by the midwife or nurse.

Related WNHS policies, procedures and guidelines

KEMH Pharmacy and Medication Clinical Guidelines - [Domperidone](#)
 KEMH Pharmacy and Medication Clinical Guidelines - [Cabergoline](#)
 KEMH Pharmacy and Medication Clinical Guidelines - [Nurse / Midwife Initiated Medications](#)
 Obstetrics and Gynaecology Guideline - [Breastfeeding: Increasing Breast Milk Supply](#).
 Neonatal Clinical Guideline - [Postnatal Midwifery Care](#)

Document owner:	Neonatal Directorate Management Committee		
Author / Reviewer:	Neonatal Directorate Management Committee		
Date first issued:	July 13		
Last reviewed:	1 st May 2016	Next review date:	1 st May 2019
Endorsed by:	Neonatal Directorate Management Committee	Date endorsed:	May 2016
Standards Applicable:	NSQHS Standards: 1  Governance, 4  Medication Safety		

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