Guidelines for Oxytocin Administration after Birth: AWHONN Practice Brief Number 2 *

Administration Options. Administer IV oxytocin by providing a bolus dose followed by a total minimum infusion time of 4 hours after birth. For women who are at high risk for a postpartum hemorrhage or who have had cesarean births, continuation beyond 4 hours is recommended. Rate and duration should be titrated according to uterine tone and bleeding.

Option 1

- Oxytocin 20 units in 1 liter normal saline (NSS) or lactated Ringer’s (LR) solution
- Initial bolus rate 1000 ml/hour bolus for 30 minutes (equals 10 units) followed by a maintenance rate of 125 ml/hour over 3.5 hours (equals remaining 10 units)

Option 2

- Some facilities supply only one standard pre-mixed concentration of IV fluid with oxytocin used for both intrapartum labor induction and postpartum third stage management. For those facilities that have only, for example, 30 units in 500 ml of NS or LR solution, set the infusion pump rate to 334 ml/hour for 30 minutes (10 units in 167 ml), then reduce the rate to 95 ml/hour (remaining 20 units) over 3.5 hours.

Option 3

- Give oxytocin 10 units IM in women without IV access.

*Excerpted from Guidelines for Oxytocin Administration After Birth AWHONN Practice Brief Number 2, JOGNN, 44, 161-163; 2015.