1. **Allergies:**  
   - NKDA  
   - Allergic to: ________________________________________________

2. Patient to receive epidural infusion as initiated by the physician with:  
   - Fentanyl (Sublimaze) 2mcg/1ml and Bupivacaine (Marcaine) 0.125% in 300 ml Normal Saline  
   - Other: _______________________________________________________________________

3. Patient Controlled Epidural Analgesia as follows:  
   - Bolus: _____________________________  
   - Basal Rate: _________________________  
   - Lockout: __________________________

4. Pre-hydrate with Lactated Ringers 1000 ml within 30 minutes of procedure unless contraindicated.

5. Epidural Protocol to include:  
   A. Label patient chart, infusion pump, and tubing “Epidural Catheter”  
   B. No systemic narcotics or antiemetics to be given except as ordered by the OB anesthesia Service  
   C. Maintain Intravenous access  
   D. Medications to be available at bedside:  
      1. Naloxone (Narcan) 2 mg / 2 ml abbojet  
      2. Ephedrine diluted to 5mg / 1 ml normal saline

6. Assessment and documentation will include:  
   A. Pain Score  
   B. Vital signs, Level of sedation, and oxygen saturation every 15 minutes X 4, then every 30 minutes for the duration of labor. Notify the anesthesia resident of any altered mental status, O2 saturation < 96% and/or any drop in blood pressure < 80% baseline.  
   C. Circulation, limb strength/movement every 1 hour X 4, every 2 hours X 2, then every 4 hours. Notify the anesthesia resident of any development of upper extremity weakness.  
   D. Dressing and catheter site should be accessed every 4 hours for drainage or bleeding. Notify the anesthesia resident if drainage or bleeding present.  
   E. Notify the anesthesia resident of any change in status or distress of the fetus

7. The Labor and Delivery RN may remove the epidural catheter.