

OBGYN Pharm Cards

#1

METRONIDAZOLE (FLAGYL)	
Drug Class	Antiprotozoal, Antibiotic – nitroimidazole
Mechanism of Action	Diffusion across bacterial membrane → Disrupts DNA synthesis in anaerobes / protozoa → Cell death → Bactericidal, Amoebicidal, Trichomonacidal
Indications	Protozoal Infections <ul style="list-style-type: none"> <li>- Trichomoniasis, Bacterial Vaginosis, Giardiasis, Intestinal Amebiasis, Amebic Liver Abscess</li> </ul> Anaerobic Bacterial infections <ul style="list-style-type: none"> <li>- PID, Pseudomembranous Colitis, Intra-abdominal Infections</li> </ul> Off- label <ul style="list-style-type: none"> <li>- Peri-op prophylaxis, Chron’s disease, Rosacea, H. pylori</li> </ul>
Contraindications	<ul style="list-style-type: none"> <li>● 1<sup>st</sup> Trimester Pregnancy (Category B)</li> <li>● Hypersensitivity</li> <li>● Taken with ETOH or Disulfiram</li> <li>● Cockayne syndrome</li> </ul>
Adverse Reactions-list	<ul style="list-style-type: none"> <li>● Hypersensitivity rxn</li> <li>● Metallic taste</li> <li>● N/V/D</li> <li>● Abdominal Pain</li> <li>● Neurological → DILSULFIRAM-LIKE reaction if taken with ETOH</li> </ul>
Monitoring	No specific laboratory monitoring parameters suggested
Starting and Maximal Dose	Route: PO & IV <ul style="list-style-type: none"> <li>- 500 mg PO/IV BID x 7 days (usual dosing)</li> <li>- 2 g PO x 1 day</li> </ul> Route: Topical <ul style="list-style-type: none"> <li>- 1-2% Daily</li> </ul>
Source: <a href="https://online.epocrates.com/drugs/75110/Flagyl/Monograph">https://online.epocrates.com/drugs/75110/Flagyl/Monograph</a>	

#2

### ACETAMINOPHEN (TYLENOL)

Drug Class	Non-Opioid Analgesic – NOT ANTI-INFLAMATORY
Mechanism of Action	Inhibits prostaglandin synthesis in the CNS → analgesic and antipyretic
Indications	Fever, Pain relief
Contraindications	<ul style="list-style-type: none"><li>• Hypersensitivity rxn</li><li>• Concomitant use with Benzocaine topical and Lidocaine topical</li><li>• LIVER FAILURE (antidote- NAC)</li></ul>
Adverse Reactions-list	<ul style="list-style-type: none"><li>• Hepatotoxic</li><li>• Hypersensitivity rxn</li><li>• Anemia</li><li>• Headache</li></ul>
Monitoring	<ul style="list-style-type: none"><li>• Creatinine at baseline</li><li>• LFTs if high-dose or long-term tx</li></ul>
Starting and Maximal Dose	<ul style="list-style-type: none"><li>• 6-11 yo<ul style="list-style-type: none"><li>○ Start: 10-15 mg/kg PO</li><li>○ Max: 75 mg/kg/day PO</li></ul></li><li>• 12 yo and older<ul style="list-style-type: none"><li>○ Start: 325-650 mg PO</li><li>○ Max: 4 g/day PO</li></ul></li></ul>

Source: <https://online.epocrates.com/drugs/306/acetaminophen>

#3

**ONDANSETRON (ZOFRAN)**

Drug Class	Antiemetic – 5-HT <sub>3</sub> Receptor Antagonist
Mechanism of Action	Selectively antagonizes serotonin 5-HT <sub>3</sub> receptors via vagus nerve → Deactivates vomiting center in medulla oblongata
Indications	Nausea, Vomiting (related to cancer chemotherapy related, post-op, gastroenteritis)
Contraindications	<ul style="list-style-type: none"> <li>• Hypersensitive rxn</li> <li>• Congenital long QT syndrome</li> <li>• Contaminant use with drugs causing QT prolongation (ex. apomorphine)</li> </ul>
Adverse Reactions-list	<ul style="list-style-type: none"> <li>• Hypersensitivity rxns</li> <li>• QT Prolongation</li> <li>• Serotonin syndrome</li> <li>• SJS / TEN</li> <li>• Headache</li> <li>• Constipation</li> </ul>
Monitoring	Electrolyte abnormalities, Cardiac issues (MI, CHF, bradycardia)
Starting and Maximal Dose	<ul style="list-style-type: none"> <li>• N/V Chemo-related <ul style="list-style-type: none"> <li>○ Start: 0.15 mg/kg/dose IV (30 min before chemo)</li> <li>○ Max: 16 mg/dose IV <b>OR</b> 24mg PO x 1 dose</li> </ul> </li> <li>• N/V Radiation therapy <ul style="list-style-type: none"> <li>○ Start: 8 mg/dose PO</li> <li>○ Max: 8 mg/dose/day PO</li> </ul> </li> <li>• N/V Post-op <ul style="list-style-type: none"> <li>○ Start: 4 mg IV/IM x 1 (before anesthesia)</li> <li>○ Max: 4mg IV/IM x 1 <b>OR</b> 16mg/day PO</li> </ul> </li> <li>• N/V Gastroenteritis <ul style="list-style-type: none"> <li>○ Start: 8 mg PO/IV q8h prn</li> <li>○ Max: 24 mg/day PO/IV</li> </ul> </li> </ul>

Source: <https://online.epocrates.com/drugs/144110/Zofran/Monograph>

#4

### LABTATELOL

Drug Class	Non-Selective Beta Blocker and Selective Alpha 1 Blocker
Mechanism of Action	Blocks beta receptors in heart and alpha receptors in vessels → (Alpha) Inhibits epinephrine from SNS and produces peripheral vasodilation / reduced vascular resistance → (Beta) Reduces HR and cardiac contractility → Lower BP
Indications	<ul style="list-style-type: none"><li>• Gestational HTN</li><li>• Hypertensive Emergencies</li></ul>
Contraindications	<ul style="list-style-type: none"><li>• Hypersensitivity</li><li>• Severe bradycardia or prolonged hypotension</li><li>• 2<sup>nd</sup> and 3<sup>rd</sup> degree heart block</li><li>• Heart failure</li><li>• Bronchial asthma</li><li>• Obstructive lung disease</li></ul>
Adverse Reactions-list	<ul style="list-style-type: none"><li>• Dizziness, headache, N/V</li><li>• Bradycardia</li><li>• CHF</li><li>• Syncope</li><li>• SOB</li><li>• Bronchospasm</li></ul>
Monitoring	Heart rate
Starting and Maximal Dose	<ul style="list-style-type: none"><li>• Gestational HTN<ul style="list-style-type: none"><li>○ Start: 20 mg IV x 1 dose</li><li>○ Max: 300 mg/total dose</li></ul></li><li>• HTN Emergency<ul style="list-style-type: none"><li>○ Start: 10-20 mg IV x 1</li><li>○ Max: 300 mg/total dose</li></ul></li></ul>
Source: <a href="https://online.epocrates.com/drugs/10472/Labetalol-no-trade-name">https://online.epocrates.com/drugs/10472/Labetalol-no-trade-name</a>	

# 5

**MISOPROSTOL (CYTOTEC)**

Drug Class	Prostaglandin E1 Analog
Mechanism of Action	(GI) Stimulates parietal cells → Increases bicarbonate & mucus secretion → Mucosal thickening → inhibits gastric acid secretion (GYN) Binds to smooth muscles in uterus lining → Increases uterine contractions and reduces cervical tone
Indications	<ul style="list-style-type: none"><li>• GI Use<ul style="list-style-type: none"><li>○ NSAID GI Ulcer Prevention, Chronic Constipation</li></ul></li><li>• Uterotonic Use<ul style="list-style-type: none"><li>○ Cervical Ripening, Early Pregnancy Termination (up to 70 days gestation)</li></ul></li></ul>
Contraindications	<ul style="list-style-type: none"><li>• Hypersensitivity</li><li>• Pregnancy (in GI use)<ul style="list-style-type: none"><li>○ Category X / BLACK-BOX WARNING → ABORTIFACIENT</li></ul></li><li>• Major uterine surgery history</li></ul>
Adverse Reactions-list	<ul style="list-style-type: none"><li>• N/V/D</li><li>• Abdominal cramping</li><li>• Miscarriage / Uterine rupture</li><li>• Vaginal bleeding</li></ul>
Monitoring	No specific laboratory monitoring parameters suggested unless pregnant (serum pregnancy test)
Starting and Maximal Dose	<ul style="list-style-type: none"><li>• NSAID GI ulcer prevention<ul style="list-style-type: none"><li>○ Start: 100-200 mcg/day PO</li><li>○ Max: 100-200 mcg/day PO</li></ul></li><li>• Chronic constipation<ul style="list-style-type: none"><li>○ Start: 600-2400 mcg/day PO</li><li>○ Max: 600-2400 mcg/day PO</li></ul></li><li>• Cervical ripening<ul style="list-style-type: none"><li>○ Start: 25 mcg/day PV</li><li>○ Max: 50 mcg/day PV</li></ul></li><li>• Abortion<ul style="list-style-type: none"><li>○ Start: 800 mg buccally x 1 dose</li><li>○ Max: 800 mg buccally x 1 dose</li></ul></li></ul>

Sources: <https://online.epocrates.com/drugs/1806/Cytotec>, Pance Prep Pearls

#6

MEDROXYPROGESTERONE ACETATE (DEPO PROVERA)	
Drug Class	Progestin
Mechanism of Action	Binds to progesterone receptor → inhibits the production of gonadotropin (GnRH) → Blunts LH surge → Prevents follicular maturation and ovulation
Indications	<ul style="list-style-type: none"><li>• Contraception</li><li>• Endometriosis pain</li><li>• Abnormal uterine bleeding</li></ul>
Contraindications	<ul style="list-style-type: none"><li>• Hypersensitivity</li><li>• Pregnancy</li><li>• Undiagnosed vaginal bleeding</li><li>• Breast cancer</li><li>• Thromboembolic / Cerebrovascular disorders</li><li>• Liver disease</li><li>• <b>Should not be continued for &gt; 2 years**** (risk of osteoporosis)</b></li></ul>
Adverse Reactions-list	<ul style="list-style-type: none"><li>• Menstrual Irregularities / Amenorrhea</li><li>• Weight Gain</li><li>• Headache</li><li>• Hair loss</li><li>• Osteoporosis</li><li>• Bone density loss</li><li>• Thromboembolism</li></ul>
Monitoring	<ul style="list-style-type: none"><li>• Pregnancy status prior to therapy</li><li>• Weight</li><li>• Bone mineral density</li><li>• Glucose if diabetic</li></ul>
Starting and Maximal Dose	Contraception <ul style="list-style-type: none"><li>• 150 mg IM x 3 months</li><li>• 104 mg SQ x 3 months</li></ul>
Sources: <a href="https://online.epocrates.com/drugs/226210/Depo-Provera-CI/Monograph">https://online.epocrates.com/drugs/226210/Depo-Provera-CI/Monograph</a>	

#7

**FERROUS SULFATE (IRON)**

Drug Class	Iron Supplement
Mechanism of Action	Replaces iron stores → Iron combines with porphyrin and globin → Formation of hemoglobin → Increase in oxygen transport
Indications	<ul style="list-style-type: none"><li>• Iron Deficiency Anemia</li><li>• Blood loss related to pregnancy or GI bleeding from NSAIDs</li><li>• Dietary supplementation</li></ul>
Contraindications	<ul style="list-style-type: none"><li>• Hypersensitivity</li><li>• Hemochromatosis</li><li>• Hemosiderosis</li><li>• Hemolytic Anemia</li></ul>
Adverse Reactions-list	<ul style="list-style-type: none"><li>• N/V/D</li><li>• Constipation</li><li>• Epigastric distress</li><li>• Dark stool</li></ul>
Monitoring	No specific laboratory monitoring parameters suggested
Starting and Maximal Dose	Iron Deficiency <ul style="list-style-type: none"><li>• 50-100mg PO for 3-6 months</li></ul>
Sources: <a href="https://www.ncbi.nlm.nih.gov/books/NBK557376/">https://www.ncbi.nlm.nih.gov/books/NBK557376/</a> , <a href="https://online.epocrates.com/drugs/32601/ferrous-sulfate/Adult-Dosing">https://online.epocrates.com/drugs/32601/ferrous-sulfate/Adult-Dosing</a>	

### FLUCANAZOLE ( DIFLUCAN)

Drug Class	Anti-fungal – Triazole
Mechanism of Action	Inhibits synthesis of ergosterol → Alteration to fungal cell membrane → Arrest of fungal cell growth
Indications	<ul style="list-style-type: none"> <li>• Candida infections               <ul style="list-style-type: none"> <li>○ Oropharyngeal, esophageal, vaginal</li> <li>○ Prophylaxis for bone marrow transplant recipient</li> </ul> </li> <li>• <i>Cryptococcus neoformans</i> infections               <ul style="list-style-type: none"> <li>○ Meningitis</li> </ul> </li> </ul>
Contraindications	<ul style="list-style-type: none"> <li>• Hypersensitivity</li> <li>• Concomitant use with drugs known to prolong QT interval</li> </ul>
Adverse Reactions-list	<ul style="list-style-type: none"> <li>• N/V/D</li> <li>• Headache</li> <li>• Rash</li> <li>• Abdominal Pain</li> <li>• Increased LFTs</li> </ul>
Monitoring	<ul style="list-style-type: none"> <li>• Creatinine at baseline</li> <li>• LFTs</li> </ul>
Starting and Maximal Dose	<ul style="list-style-type: none"> <li>• Candidiasis – Systemic               <ul style="list-style-type: none"> <li>○ Start: 800 mg PO/IV x 1 dose</li> </ul> </li> <li>• Candidiasis – Esophageal               <ul style="list-style-type: none"> <li>○ 200-400 mg PO/IV</li> </ul> </li> <li>• Candidiasis – Oropharyngeal               <ul style="list-style-type: none"> <li>○ 100-200 mg PO/IV</li> </ul> </li> <li>• Candidiasis - Vulvovaginal               <ul style="list-style-type: none"> <li>○ 150 mg PO x 1 dose</li> </ul> </li> <li>• Meningitis – Cryptococcal               <ul style="list-style-type: none"> <li>○ Start: 400 mg/kg/dose PO/IV</li> <li>○ Max: 400 mg/day</li> </ul> </li> </ul>
Sources: <a href="https://online.epocrates.com/drugs/63510/Diflucan/Monograph">https://online.epocrates.com/drugs/63510/Diflucan/Monograph</a>	



#9

**MIFEPRISTONE (MIFEPREX)**

Drug Class	Antiprogesterone Steroids
Mechanism of Action	Inhibits activity of progesterone
Indications	Early Pregnancy Termination
Contraindications	<ul style="list-style-type: none"><li>• Hypersensitivity</li><li>• Ectopic pregnancy</li><li>• Undiagnosed adnexal mass</li><li>• Concurrent IUD use</li><li>• Hemorrhagic disorder</li></ul>
Adverse Reactions-list	<ul style="list-style-type: none"><li>• Vaginal bleeding</li><li>• Incomplete abortion</li><li>• Abdominal Cramps</li><li>• N/V/D</li><li>• Fetal malformation</li></ul>
Monitoring	No specific laboratory monitoring parameters suggested
Starting and Maximal Dose	<ul style="list-style-type: none"><li>• Abortion<ul style="list-style-type: none"><li>○ Start: 200 mg x 1 dose</li><li>○ Max: 200 mg x 1 dose</li></ul></li></ul>
Sources: <a href="https://online.epocrates.com/drugs/2449/mifepristone">https://online.epocrates.com/drugs/2449/mifepristone</a>	

#10

**PROPYLTHIOURACIL (PTU)**

Drug Class	Thioamide agents
Mechanism of Action	Inhibit both the oxidative process required for iodination → Blocks conversion T4 to T3
Indications	<ul style="list-style-type: none"><li>• Hyperthyroidism / Grave's Disease / Thyroid Storm<ul style="list-style-type: none"><li>○ Preferred in preconception and up until 2<sup>nd</sup> trimester</li><li>○ Recommended in 1<sup>st</sup> trimester</li></ul></li></ul>
Contraindications	<ul style="list-style-type: none"><li>• Hypersensitivity</li></ul>
Adverse Reactions-list	<ul style="list-style-type: none"><li>• Hepatotoxic</li><li>• Agranulocytosis</li></ul>
Monitoring	<ul style="list-style-type: none"><li>• CBC</li></ul>
Starting and Maximal Dose	<ul style="list-style-type: none"><li>• Start: 300-600 mg/day PO</li><li>• Max: 300-400 mg/day PO</li></ul>
Sources: <a href="https://online.epocrates.com/drugs/27710/propylthiouracil/Monograph">https://online.epocrates.com/drugs/27710/propylthiouracil/Monograph</a>	