

Table 1: Recommended Dosages: Parenteral Medication for Labour Analgesia

* narcotics are known to cause respiratory depression; use with caution, and assess.

Medication	Route of Administration	Dosage	Onset of Action (minutes)	Expected Time to Maximum Analgesia (minutes)	Duration of Action
Morphine	IV (slow push)	2-5 mg (IV) q2-4h prn	5 min.	IV: 20 min.	1-3 hours
	Subcutaneous (subQ or SC)	10-20 mg (subQ) q3h prn	30-40 min.	subQ: 50-90 min.	2-6 hours
FentaNYL	IV (slow push)	0.5-1 microgram/kg (max. 100 micrograms); - repeat q 5-10 min. until adequate analgesia or maximum dosage is reached (maximum hourly dosage = 2 micrograms/kg or 200 micrograms/hour)	1 min.	5-10 min.	30-60 minutes
	IV PCA	10-25 microgram bolus, 5-10 minute lockout, no background			
Hydromorphone	IM or subQ	0.8-2 mg q3h prn			2-4 hours
	IV (very slow push)	0.2-0.6 mg q2-4h prn	5 min.		
	IV PCA	0.1-0.2 mg bolus with lockout of 6 minutes, and continuous infusion of 0.1-0.2 mg/hr			
Opioid antagonist: Naloxone	IM/IV	Neonates: 0.1 mg/kg q2-3 min. prn Adults: 0.4-2 mg IV q2-3 min. prn (doses as low as 0.04 mg may be effective for adults, depending on degree of sedation)	2 min.	n/a	20-60 minutes

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References:

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