To facilitate optimal care the midwife should ask the referring hospital to provide all medications the mother will need during her stay at PMH.

Mothers will need to see their own GP or, if they are from the country the midwife can provide a list of local GPs to prescribe any medications required for a pre-existing condition. Country mothers can be seen at KEMH Emergency Department if they have a postnatal complication that may require treatment.

6B medical staff cannot prescribe medications for pre-existing conditions or postnatal complications.

6B medical staff may prescribe the following medications only:

1. PAIN RELIEF
   - Panadol (Paracetamol 500mg). 1 – 2 tablets 4 – 6 hourly. No more than 8 in a 24 hour period. OR
   - Panadeine (Paracetamol 500mg/Codeine 8 mg). 1 – 2 tablets 4 – 6 hourly. No more than 8 in a 24 hour period. OR
   - Panadeine forte (Paracetamol 500mg/Codeine 30 mg). 1 – 2 tablets 4 – 6 hourly. No more than 8 in a 24 hour period. For 24 to 48 hours only
   - Tramadol. 1 – 2 tablets 4 – 6 hourly. No more than 8 in a 24 hour period.

2. ANTI-INFLAMMATORIES
   - Diclofenac (voltaren® and others). 1 – 2 tablets 6 hourly. No more than 6 in a 24 hour period.
   - Ibuprofen (nurofen® and others). 1 – 2 tablets 6 hourly. No more than 6 in a 24 hour period.

3. ANTIFUNGALS
   Daktarin oral gel is recommended for the treatment of Candida on mothers nipples as it does not need to be washed off prior to breast feeding. It should be spread thinly with no “balling” so as to prevent aspiration by the infant during feeding.

4. HYPNOTICS
   Hypnotics should only be ordered as a once only medication on the front of the Mother’s medication chart, for example, Temazepam 10 to 20mg nocte.
5. DOMPERIDONE (MOTILIJUM) 10MG TABLETS
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 but who are not inpatients themselves. Mothers can have the prescription written up on the medication chart as a discharge drug and can then self medicate.

**Dose:** 1 tablet (10mg) 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 see KEMH Medication A-Z Domperidone policy and obstetric & midwifery guideline 8.2.9 Increasing breast milk supply.

6. DOSTINEX (CABERGOLINE) 500MCG TABLETS
Dostinex is used for the rapid suppression of milk.

**Dose:** If lactation is not established give 2 tablets (1mg) in a single dose on day one
If lactation is established and suppression is required give ½ tablet (0.25mg) twice daily for 2 days. A total of 1mg.

*Suppression of milk without medication is often preferable. Suppression guidelines are kept in the midwife’s cupboard*

METHADONE
Patients requiring Methadone obtain this from the medical methadone clinic. The referring Doctor must organise this with the clinic prior to the Mother being transferred to PMH.

ANTI D IMMUNOGLOBULIN:
*See NCCU Guideline, section 21: Care of the Postnatal Mother on 6B – Postnatal Midwifery Care.*

HOW TO DISPENSE DRUGS
1. SELF MEDICATION
This is the preferred method as the mothers receive a prescribed supply of drugs and can then take as instructed/required. Medications should be prescribed by the doctor as a discharge medication on the mother’s own medication chart (MR810) with her details and unit record number (not the infants) and sent to dispensary via the chute (station 40). They will then have a 10 day (or less if ordered) supply dispensed to them. This can then be given directly to the mother after ensuring the mother understands the instructions on the packet.

2. 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 a medication chart (as above). Medications must then be administered by the midwife or nurse.

After hours the 6B registrar can dispense a limited amount of the medication labelled correctly with patients details and administration and dosing information.

REFERENCES
WNHS Consumer Information: Medicines used to Relieve Pain, Nov 2010. WNHS Intranet.
WNHS Obstetric and Gynaecology Guidelines: Section P, Pharmacy and Medications September 2013.