

SCHEDULED SUBSTANCES	APPROVED ROUTE OF ADMINISTRATION	RESTRICTIONS/ CONDITIONS
----------------------	----------------------------------	--------------------------

**ADULT ONLY****CONTROLLED SUBSTANCES**

Pethidine	Intramuscular	Single dose only up to 125mgs intrapartum
-----------	---------------	---

**ANTIBIOTICS**

Benzylpenicillin Lincomycin	Intravenous	Group B Streptococcus prophylaxis intrapartum
Amoxicillin Cephalexin Nitrofurantoin	Oral	
Flucloxacillin Clindamycin	Oral	

**ANTIDOTES****AGENTS TO TREAT ADVERSE EFFECTS**

Naloxone hydrochloride	Intravenous Intramuscular	Maximum 0.4 mg
------------------------	------------------------------	----------------

**ANTI-EMETIC**

Metoclopramide	Intravenous Intramuscular	Single dose only Maximum 10mg
----------------	------------------------------	----------------------------------

**LOCAL ANAESTHETIC**

Lignocaine 1%	Local infiltration	Maximum dose 20 mls
---------------	--------------------	---------------------

**RESTRICTED SUBSTANCES**

Nifedipine	Oral	10 mg only
Indomethacin	Rectal	100 mg only
Betamethasone	Intramuscular	
Nitrous oxide and oxygen	Inhalation	Up to 70% nitrous oxide
Oxytocin	Intramuscular Intravenous	10 units per dose to a maximum dose of 20 units
Oxytocin/Ergometrine maleate	Intramuscular	Single dose only
Ergometrine maleate	Intramuscular Intravenous	Single dose only
Levonorgestrel	Oral	Minipill – 8 week supply only
Levonorgestrel	Oral	Emergency contraception

SCHEDULED SUBSTANCES	APPROVED ROUTE OF ADMINISTRATION	RESTRICTIONS/ CONDITIONS
-------------------------	-------------------------------------	-----------------------------

**SPECIFIC VACCINES**

Anti D (Rh) immunoglobulin	Intramuscular	Antenatal prophylaxis at 28 and 34 weeks gestation  Sensitising events during pregnancy  Postpartum to avoid Rhesus iso-immunisation
MMR – Measles, mumps and rubella live attenuated vaccine	Intramuscular  Subcutaneous	Postpartum women found to be seronegative for rubella

SCHEDULED SUBSTANCES	APPROVED ROUTE OF ADMINISTRATION	RESTRICTIONS/ CONDITIONS
----------------------	----------------------------------	--------------------------

**NEONATAL ONLY**

**ANTIDOTES**

**AGENTS TO TREAT ADVERSE EFFECTS**

Naloxone hydrochloride	Intramuscular Intravenous Subcutaneous	Maximum 0.4 mg
------------------------	--	----------------

**SPECIFIC VACCINES**

Hepatitis B Immunoglobulin-VF	Intramuscular	For babies of HBsAG positive mothers only
Hepatitis B vaccine	Intramuscular	
BCG Vaccine	Intradermal	Only if certified by Qld TB Control Centre