

## Hypertension (HTN) in Pregnancy & the Postpartum Period Data Collection Tool

**Topic:**

- Review HTN events; document successes and barriers in this tool.

**Goal:**

- Time to treatment < 60 minutes
- Reduce morbidity/mortality for Minnesota for childbearing women
  - New onset severe HTN ( $\geq 160$  systolic OR  $> 110$  diastolic)
  - Preeclampsia or Eclampsia
  - Chronic/gestational HTN with superimposed preeclampsia

**Instructions:**

- Complete this tool within 24 hours of all cases that have:
  - New onset severe HTN ( $> 160$  systolic or  $> 110$  diastolic) events  
*AND/WITH*
  - Pregnancy to 6 weeks postpartum  
*AND IN*
  - ANY clinical setting *i.e.: triage, L&D, Antepartum, PP, ED*

**Debrief cases:**

- Include primary RN and primary MD (Use Boxes below)

<p><b>Review Date:</b> _____</p> <p><b>Event Date/Time:</b> _____</p> <p><b>Readmission:</b> Yes No</p> <p><b>Ethnicity:</b> <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Hispanic</p> <p><b>Pt Identifies as:</b> <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Asian</p> <p><input type="checkbox"/> American Indian/Alaskan Native</p> <p><input type="checkbox"/> Native Hawaiian/Pacific Islander</p> <p><input type="checkbox"/> Other/Multiple _____</p> <p><b>Language:</b> <input type="checkbox"/> English <input type="checkbox"/> Non-English</p> <p><b>Pregnant Gestational Age</b> <input type="checkbox"/> _____</p> <p><b>OR Postpartum Days</b> <input type="checkbox"/> _____</p>	<p><b>Diagnosis:</b> <input type="checkbox"/> Chronic HTN <input type="checkbox"/> Gestational HTN</p> <p><input type="checkbox"/> Preeclampsia <input type="checkbox"/> Superimposed Preeclampsia</p> <p><input type="checkbox"/> Eclampsia</p> <p><b>Was patient with severe range BP treated within 60 minutes of confirmatory BP?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Time between first severe range BP &amp; follow-up BP (in min):</b> _____</p> <p><b>If treated, time from second elevated BP to treatment (in min):</b> _____</p> <p><b>Was OB HTN Emergency Pathway used?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Discharge Education:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Sent home with BP cuff:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Blue Band given:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Discharge Management:</b></p> <p><b>Was follow-up appointment scheduled within 3-5 days (for all women with any hypertensive disease of pregnancy)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>Was patient discharged on meds?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><b>If YES: Was follow-up appointment scheduled in &lt;72 hrs?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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**Opportunities for improvement to reduce time to treatment (identification of severe HTN to treatment goal <60 minutes):**

TEAM ISSUES	Needs Improvement (blank = goals met)	Notes Could bias have influenced outcome?	SYSTEM ISSUES	Needs Improvement (blank = goals met)	Notes Could bias have influenced outcome?
Communication			HTN medication timeliness		
Recognition of severe HTN			Transportation (intra- inter-hospital transport)		
Assessing situation			Support (in-unit, other areas)		
Decision making			Med availability		
Teamwork			Other issues		
Leadership					