**Hypertension in Pregnancy**

1. **What is in the spectrum of hypertension disorders in pregnancy?**
2. **What are the risks associated with hypertensive disorders to both fetus and mom?**

**Mom Fetus**



1. **What is the “definition” of Chronic Hypertension?**

**a. What is the treatment for cHTN?**

**b. Bonus: What medication should they not receive in a case of PPH?**

1. **What is the “definition” of Gestational Hypertension? What percentage of patients with gHTN will develop pre-eclampsia?**

**5. Treatment of severe range pressure while inpatient, please fill in the table:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Drug Name** | **Starting Dose** | **Cumulative Max Dosing** | **Route** | **Contraindications** |
|  |  | **300mg** |  |  |
|  |  |  |  | **Tachycardia >100bpm** |
|  |  |  | **PO** |  |

1. **What 3 urine tests are commonly used to screen for proteinuria/what are their cutoffs? Is protein in urine required for pre-eclampsia diagnosis?**
2. **How do you differentiate “Preeclampsia without severe features” from “Preeclampsia WITH severe features”?**
3. **Antepartum fetal testing for HDP specturum:** 
   1. **When to begin fetal monitoring?**
   2. **What is antenatal testing?**
   3. **Monitoring for patients with CHTN with meds**
   4. **Preeclampsia without SF/gHTN**
   5. **Preeclampsia with severe features:**
4. **How long is a mom at risk for pre-eclampsia post partum?**
5. **What is the diagnosis of eclampsia?**
6. **Preeclampsia prevention** 
   1. **Prevention of preeclampsia for high risk patients includes starting ASA between \_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_ gestational age, but optimally before \_\_\_\_\_ weeks. This should be continued until \_\_\_\_\_\_.**
   2. **Why not start ASA earlier or later in pregnancy?**

* 1. **Which patients qualify for ASA prophylaxis? (If factors are not mentioned, assume they do not have them)** 
     1. **42yo G1P0**
     2. **32 yo, caucasion female, on medicaid, G2P0010 with history of miscarriage at 8 weeks**
     3. **31 yo, AA female, G2P1011 with history of GDM**
     4. **14 yo AA female, G1P0**
     5. **22 yo G2P1001, BMI of 32, whose Aunt had preeclampsia**
     6. **32 yo, G2P1001, history of C section, with gestational hypertension in previous pregnancy**
     7. **26 yo G1P0 diagnosed with Lupus**

1. **Match the condition with the recommended delivery timing**

|  |  |
| --- | --- |
| **a. Chronic hypertension controlled without meds** | **1. 37 0/7 or at time of diagnosis if >37 weeks** |
| **b. Pre-eclampsia with severe features (stable)** | **2. 37 0/7 to 39 6/7** |
| **c. GHTN** | **3. 34 0/7 or at time of diagnosis if >34 0/7** |
| **d. Preeclampsia without severe features** | **4. 38 0/7 to 39 6/7** |
| **e. Chronic hypertension controlled with meds** | **5. 37 0/7 or at time of diagnosis if >37 weeks** |

1. **What is the diagnosis of HELLP syndrome?**
2. **Which patient’s should have Mag started in regards to hypertensive disorders?**
   1. **What is the dosing for Mag?**
   2. **What is the therapeutic range?**
   3. **How long should Mag be continued?**
   4. **Do all patients need a Mag level ordered? Why or why not?**
   5. **What is the antidote for Mag toxicity?**