**Hypertension in Pregnancy**

1. **What are the 4 classifications of hypertension during pregnancy and how are they defined?**

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1. **What is the “definition” of Chronic Hypertension?**
2. **What is the “definition” of Gestational Hypertension?**
3. **Is proteinuria required for a diagnosis of preeclampsia?**
4. **What 3 urine tests are commonly used to screen for proteinuria/what are their cutoffs?**
5. **How do you differentiate “Preeclampsia without severe features” from “Preeclampsia WITH severe features”?**
6. **What is the diagnosis of eclampsia?**
7. **When should patients with preeclampsia without severe features be delivered?**
8. **How should pt with preeclampsia without severe features or mild gestational htn be monitored?**
9. **In patients with severe preeclampsia when should delivery happen irrespective of gestational age or maternal condition?**
10. **Delivery may be deferred for 48 hrs if maternal and fetal conditions remain stable to allow for corticosteroid administration for woman with severe preeclampsia and viable fetus at 33 6/7 wks or less with the following?**
11. **Corticosteroids should be given if feus is viable and at 33 6/7 wks or less but deliver should not be delayed regardless of gestational age with what complications?**
12. **What is the diagnosis of HELLP syndrome?**
13. **When should you give magnesium sulfate (with respect to htn)?**
14. **When should you monitor pts BP in postpartum period for women who have h/o gest htn, preeclampsia or superimposed preeclampsia and when is antihypertensive therapy recommended in postpartum period?**
15. **When should BP medication be used with persistent chronic hypertension and what are treatment goals?**
16. **What 3 antihypertensives are recommended for treatment of pregnant woman? What medications should you not start in woman of reproductive age?**

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1. **In a woman with preeclampsia what is her risk for CV disease later in life?**