

## SECONDARY CARE PATHWAY FOR HYPERTENSIVE DISORDERS IN PREGNANCY

\*In mild or moderate gestational hypertension only carry out CTT if fetal activity is abnormal (NICE, 2011).

### Principles of taking Blood Pressure

Diagnose hypertension if average systolic BP  $\geq 140$  and/or diastolic BP  $\geq 90$  on 2 occasions 4 or more hours apart  
 Mild - 140/90 - 149/99  
 Moderate - 150/100 - 159/109  
 Severe -  $\geq 160/110$

Full A/N assessment using correct cuff. If arm  $>33$ cms, use large cuff. Use right arm  
 Take BP at the beginning and end of appointment  
 Take at level of heart  
 Take in sitting position with feet supported  
 Take BP reading when sounds disappear  
 Check Urine, using a clean pot

BP Profile: 5 readings 15 minutes apart, omit first 2 and average the last 3.

### Significant symptoms:

- Epigastric pain
- Vomiting
- Headache
- Visual Disturbances
- Reduced fetal movements
- Small for gestation age

