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## Conservative Management of Preeclampsia Proper Diagnosis Chart Review Data Dictionary

The purpose of the Data Dictionary is to develop consistency in data entry. The Data Dictionary refers to elements visible when the reporting forms are printed.

**Inclusion criteria:** All patients diagnosed with hypertension of pregnancy from November 30, 2014, going backwards 20 consecutive patients with the diagnosis of hypertension of pregnancy.

**This Dictionary defines the basic elements of entries for all information forms:**

- 1) **Chart Number:** Please create a unique number for each chart that is decided on by your facility. Please do not use the patient's medical record number (MRN).
- 2) **Provider's Diagnosis at delivery:** Please select the provider's (MD, DO, CNM) delivery diagnosis from the options. The options include the approved ACOG diagnoses, followed by the most commonly used incorrect diagnoses
  - i. Chronic HTN
  - ii. Gestational HTN
  - iii. Preeclampsia **without** severe features
  - iv. Preeclampsia **with** severe features
  - v. Superimposed Preeclampsia **with** severe features
  - vi. Superimposed Preeclampsia **without** severe feature
  - vii. Superimposed Preeclampsia
  - viii. Mild Preeclampsia
  - ix. Severe Preeclampsia
  - x. PIH
  - xi. HTN in pregnancy
  - xii. HTN
  - xiii. Other
- 3) **Delivery Diagnosis Supported by Chart Documentation**
  - i. Chronic HTN
  - ii. Gestational HTN
  - iii. Preeclampsia **without** severe features
  - iv. Preeclampsia **with** severe features
  - v. Superimposed Preeclampsia **with** severe features
  - vi. Superimposed Preeclampsia **without** severe features

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## Definitions:

### **Chronic hypertension:**

A systolic BP of  $\geq 140$  mmHg or diastolic BP  $\geq 90$  mmHg predating conception, identified prior to 20 weeks gestation, that persists  $> 12$  weeks postpartum, with use of antihypertensive medications before pregnancy

### **Gestational hypertension:**

A systolic BP  $\geq 140$  mmHg or diastolic BP  $\geq 90$  mmHg taken on 2 occasions at least 4 hours that occurs after 20 weeks of gestation in a woman with previously normal blood pressure in the absence of proteinuria or other severe features (thrombocytopenia, renal insufficiency, impaired liver function, pulmonary edema or cerebral/visual symptoms)

### **Preeclampsia WITHOUT severe features:**

A systolic BP  $\geq 140$  mmHg or diastolic BP  $\geq 90$  mmHg taken on 2 occasions at least 4 hours apart after 20 weeks gestation in a woman with a previously normal blood pressure and proteinuria (greater than or equal to 300 mg per 24 hour urine collection) and without severe features (thrombocytopenia, renal insufficiency, impaired liver function, pulmonary edema or cerebral/visual symptoms)

### **Preeclampsia WITH severe features:**

Preeclampsia with severe features including blood pressure (systolic BP  $\geq 160$  mmHg or diastolic BP  $\geq 110$  mmHg taken on 2 occasions at least 4 hours apart after 20 weeks gestation in a woman with a previously normal blood pressure), thrombocytopenia (platelets  $< 100,000$ ), impaired liver function (liver enzymes to twice normal concentration or severe RUQ or epigastric pain), renal insufficiency (serum creatinine  $> 1.1$  or a doubling of serum creatinine in the absence of other renal disease), pulmonary edema or cerebral/visual disturbances.

### **Superimposed preeclampsia (AKA Eclampsia on chronic hypertension) (ACOG p. 61, CMQCC p. 21):**

New onset in a woman with hypertension prior to 20 weeks, sudden increase in proteinuria if already present in early gestation, sudden increase in BP, development of HELLP syndrome, development of headache, scotomata, or epigastric pain (p.61 ACOG Hypertension in Pregnancy, p.21 CMQCC Preeclampsia Toolkit)

### **Superimposed preeclampsia (WITHOUT severe features):**

A sudden increase in BP that was previously well controlled or escalation of antihypertensive medications to control BP, new onset of proteinuria or a sudden increase in proteinuria in a woman with known proteinuria before or early in pregnancy (p.61 ACOG)

### **Superimposed preeclampsia WITH severe features**

Severe-range BP despite escalation of antihypertensive therapy, thrombocytopenia (platelet count less than 100,000/microliter), elevated liver transaminases (two times the upper limit of normal concentration for a particular laboratory), new-onset and worsening renal insufficiency, pulmonary edema, persistent cerebral or visual disturbances (p. 61 ACOG)