



Conservative Management of Preeclampsia Data Dictionary Phase II

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

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

1) Chart Number: Create a number for the chart that is decided on by your facility. Please do not use the medical record number.

2) Patient's Date of Birth: The date of maternal birth Format: mm/dd/yyyy

3) Date Admitted: The date the patient was admitted to hospital. Format: mm/dd/yyyy

4) Date Discharged: The date the patient was discharged from the hospital. Format: mm/dd/yyyy

5) Gestational Age at Delivery: Weeks: The number of completed weeks, **Days:** the number of completed days (i.e. 34 weeks 5 days).

6) If less than 34 weeks did the patient receive a full course of antenatal corticosteroids? Yes/No Answer "yes" if full course of steroids were received. Answer "no" if a partial course or no steroids were given

7) At delivery, has this patient been diagnosed with: Select the most accurate hypertension diagnosis at the time of birth

Yes No (A) Chronic hypertension: Answer "yes" if meets criteria for diagnosis. Answer "no" if does not meet criteria

Yes No (B) Gestational hypertension: Answer "yes" if meets criteria for diagnosis. Answer "no" if does not meet criteria

Yes No (C) Preeclampsia WITHOUT severe features: Answer "yes" if meets criteria for diagnosis. Answer "no" if does not meet criteria

Yes No (D) Preeclampsia WITH severe features: Answer "yes" if meets criteria for diagnosis. Answer "no" if does not meet criteria

Yes No (E) Superimposed preeclampsia WITHOUT severe features: Answer "yes" if meets criteria for diagnosis. Answer "no" if does not meet criteria

Yes No (F) Superimposed preeclampsia WITH severe features: Answer "yes" if meets criteria for diagnosis. Answer "no" if does not meet criteria

8) Primary indication for delivery: Check one:

We want to know *why* was this patient delivered? In other words, if a 36+4 week mom with any of the five ACOG gestational hypertension diagnoses has for example, PPRM or an abruption that warrants the delivery, we want to know this (since in this situation, her underlying gestational HTN diagnosis was not what warranted delivery).

9) Did this patient have either a SBP > 160 or a DBP > 110 during her hospital stay?
Yes/No

9A) If Yes, was the patient *either* given antihypertensive medication *or* achieved BP control (SBP < 160 and DBP < 110) within 60 minutes of the initial elevated blood pressure?
Yes/No

A “Yes” answer requires either:

Treatment of severe range BP with labetalol, hydralazine, nifedipine or other antihypertensive agent
If no medication is clinically warranted then a BP (SBP < 160 or DPB <110) must be achieved

And that “time” be less than 60 minutes and calculated as follows:

Start = first severe range elevated BP

Finish=time to first dose of antihypertensive *or* BP not in severe range at 1 hour post initial severe range BP

10) Route of Delivery: Check One , and Check Regardless of Gestation (Vaginal or C/S)

11) Was infant admitted to NICU or local equivalent: Yes/No Answer “yes” if infant was admitted to a NICU or any higher level of care than a well baby nursery

12) Was patient/family education provided: Check all that apply

- Written
- Verbal
- Teach back
- None

13) Ethnicity/Race: Check one:

- White
- Asian or Asian American
- Black or African American
- Hispanic or Latino
- Native Hawaiian & Other Pacific Islander
- American Indian or Alaska Native
- Multiracial

Defined as follows: (<http://www.cdc.gov/minorityhealth/populations/REMP/definitions.html>)

White: People having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Asian or Asian American: People having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent.

Black or African American: People having origins in any of the black racial groups of Africa.

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Native Hawaiian & Other Pacific Islander: People having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

Multiracial: People having origins in two or more of the federally designated racial categories

Refused: If Patient has refused to answer

14) Payor: Please indicate payor information

15) Was the patient admitted to an ICU, step-down unit or local equivalent for any reason related to her hypertension in pregnancy diagnosis: Yes/No Answer “yes” if patient was admitted to ICU or equivalent (local equivalent could mean specialized area in L&D, step-down unit, etc.) for any reason related to the diagnosis of hypertension of pregnancy.

ADDITIONAL DATA REQUIRED

Month Delivery Totals: On the last day of every month a monthly delivery survey will automatically be created and placed in your “surveys to do” window in Delphi. Please use the following definition to determine monthly delivery totals.

Inclusion Criteria for Monthly Delivery Totals:

All delivered mothers greater than 20 weeks gestation age

Twins count as 1 delivery

Stillbirths count in the total