

Hypertensive Disorders in Pregnancy Target Population: OB

Category	Description
Gestational Hypertension	 new-onset elevated blood pressure diagnosed after 20 weeks gestation without proteinuria or severe features of preeclampsia may develop into preeclampsia
	blood pressure returns to normal levels following delivery
Preeclampsia (With or Without Severe Features)	 considered "pregnancy-specific"; new-onset elevation of blood pressure most commonly occurring after 20 weeks gestation diagnostic criteria include: systolic blood pressure of 140mmHg or greater or a diastolic blood pressure of 90mmHg on 2 occasions, occurring a minimum of 4 hours apart following 20 week gestation when blood pressure has previously been normal if proteinuria is present, 24-hour urine has 300mg or greater or protein/creatinine ratio is 0.3mg/dL or greater
	 Note: If a urine dipstick (not preferred method) is used, result of 2+ is considered significant. if proteinuria is absent with a new onset of hypertension, the presence of thrombocytopenia, renal dysfunction, liver dysfunction or pulmonary edema are considered diagnostic for preeclampsia indications of increased severity (severe features) include blood pressure elevation as indicated under Vital Signs; development of liver dysfunction, low platelets, progressive
	renal dysfunction, pulmonary edema, new-onset headache refractory to medication (unexplained by other medical diagnosis) and visual disturbances
HELLP (hemolysis, elevated liver enzymes, low platelets) Syndrome	 severe form of preeclampsia most commonly seen in the third trimester of pregnancy or during the postpartum period diagnostic criteria include hemolysis, elevated liver enzymes (LDH, AST, ALT) and low platelet levels
Eclampsia	severe sequelae to preeclampsia
	 new-onset seizure activity; not attributed to other medical diagnosis seizure is commonly preceded by severe headache, visual disturbance and change in mental status Note: In some cases, there are no signs/symptoms of preeclampsia prior to seizure activity.
Chronic Hypertension/Chronic Hypertension with Superimposed Preeclampsia	 chronic hypertension refers to elevated blood pressure that has been diagnosed prior to pregnancy or before the completion of 20 weeks gestation chronic hypertension with superimposed preeclampsia can be challenging to diagnose; signs/symptoms may include an abrupt increase in baseline blood pressure levels, increase in proteinuria, development of thrombocytopenia and unexpected elevation of liver enzymes chronic hypertension carries an increased risk for low-birth-weight infants and medically indicated preterm births

