

# HTN and Cardiomyopathy Algorithm

Pregnant or Postpartum Patient Presenting to ED

Exhibiting ANY of these SYMPTOMS R/O Cardiomyopathy up to 1 yr. Postpartum

- Shortness of Breath
- Chest pain, tightness OR pressure
- Tachycardia or Palapatations

Exhibiting any of these vital sign changes

- Resting Heart Rate  $\geq 110$
- Respiratory Rate  $\geq 24$
- O<sub>2</sub>Sat  $\leq 95\%$
- Heart Murmur
- Lung Basilar Crackles

Exhibiting ANY of these SYMPTOMS R/O Preeclampsia if pregnant or < 6 wks. Postpartum

- Persistent Headache
- Visual Changes
- Dizziness
- Sudden weight gain (>than 4lbs in a week)
- Epigastric Pain
- B/P  $\geq 140/90$

Two B/P  $\geq 160$  Diastolic or  $\geq 110$  systolic taken 15-60 minutes apart\*

\*does NOT need to be consecutive

Do you Have In-House OB services

Order:  
ECG  
BNP  
IV access  
Chest X-Ray

Contact In-House OB in < 15 min from arrival

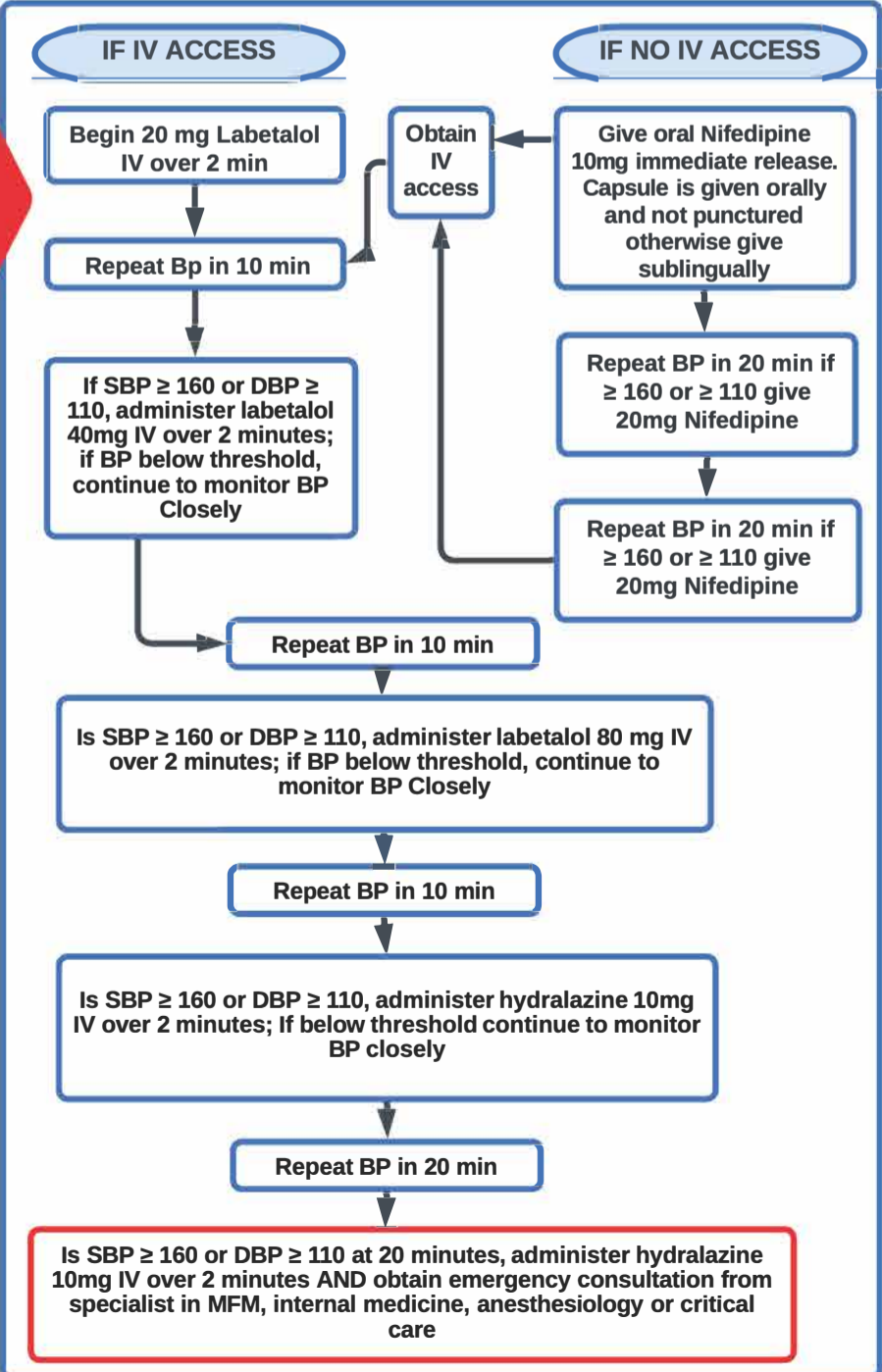
Expedite Consult with MFM/OB in  $\leq 30$ min from arrival, prepare for transfer to higher level of care  
Initiate IV of LR or NS 125ml/hr., Strict I & O initiate protocols

Draw Preeclampsia labs

- CBC
- PT, PTT, Fibrinogen
- CMP
- Urinalysis and Urine Protein/Creatinine Ratio
- Type and Screen

Immediately Administer Antihypertensive Medication AND Initiate Magnesium Sulfate Infusion

Avoid Labetalol in Asthma or HF. Use Nifedipine



Administer Magnesium Sulfate 4Gms IVPB per infusion pump over 20minutes then at 2 gm/hr with mainline of LR or NS.  
Stop infusion if RR  $\leq 12$   
R/O Pulmonary Edema if O<sub>2</sub> Sat < 93% or RR > 24  
\*Do not give if pulmonary edema, renal failure or Myasthenia Gravis

Antihypertensives:

Labetalol IV 100mg/20ml vial  
Initial: 20mg (4ml) IV bolus followed by 40mg (8m) IV if not effective within 10 min; followed by 80mg (16ml) if not effective within 10 min

Hydralazine IV 20mg/ml vial  
Initial: 5-10mg (0.25-0.6ml) IV bolus followed by 10mg (0.5ml) IV if not effective within 20 min

Nifedipine 10mg immediate release tablets  
Initial: 10mg PO, followed by 20mg PO if not effective within 20 minutes; followed by another 20mg PO if not effective within 20 minutes