Appendix B: Suspected Preeclampsia Algorithm

New Onset HTN? ≥ 140/90

- NO
- YES

If there is new onset proteinuria or severe features, consider ATYPICAL PREECLAMPSIA and do laboratory assessment

BP ≥ 160/110* Confirmed

- NO
- YES

Preeclampsia

- NO
- YES

Gestational HTN

Preeclampsia

Check for Severe Features:
- Persistent Headache
- Visual Changes
- Abdominal Pain
- Pulmonary edema
- Thrombocytopenia (<100k)
- Elevated LFTs (2x normal)
- Creatinine > 1.2
- Elevated LDH

< 34 weeks with severe features in addition to HTN or ≥ 34 weeks

- < 34 weeks with HTN as ONLY severe feature

Baby delivered at center with appropriate level of maternal and neonatal care

Antepartum admission or TRANSFER to center with appropriate level of maternal and neonatal care

Deliver at 37 weeks

Assess & address patient/family education needs

TREAT BP ACCORDINGLY

If abnormal labs or symptoms, proceed to delivery

*Clinicians may consider antihypertensive therapy at 155/105 mm Hg given the association with increased maternal morbidities at this threshold in several studies as discussed in Toolkit Section: Borderline Severe-Range Blood Pressures: A Clinical Conundrum on page 35.

This figure was adapted from the Improving Health Care Response to Preeclampsia: A California Quality Improvement Toolkit, funded by the California Department of Public Health, 2014; supported by Title V funds.