

Reducing Readmissions for Hypertensive Disorders of Pregnancy

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BACKGROUND

- Hypertensive disorders in pregnancy (HDP) are common in the United States and associated with maternal complications including heart attack and stroke
- HDP are a leading cause of pregnancy related death in the United States.
- Prevalence of hypertensive disorders in pregnancy increased from 10.8 to 13 % between 2017 and 2019
- Among maternal deaths that occur during delivery hospitalizations, 31% were associated with documented hypertensive disorders of pregnancy

OBJECTIVES

1. The goal of this project is to reduce postpartum readmissions related to HDP by 10%
2. The outcome will be measured by reviewing the number of readmissions due to HDP at baseline, over the 6 month time period after the first intervention and the 6 month time period after the second intervention and another 6 month time period after the third intervention

ACTIONS TAKEN

- Factors contributing to readmissions related to HDP were identified.
 - Adequate follow up
 - Understandable and adequate discharge instructions
 - Identifying and treating patients at high risk of readmission prior to the time of initial discharge

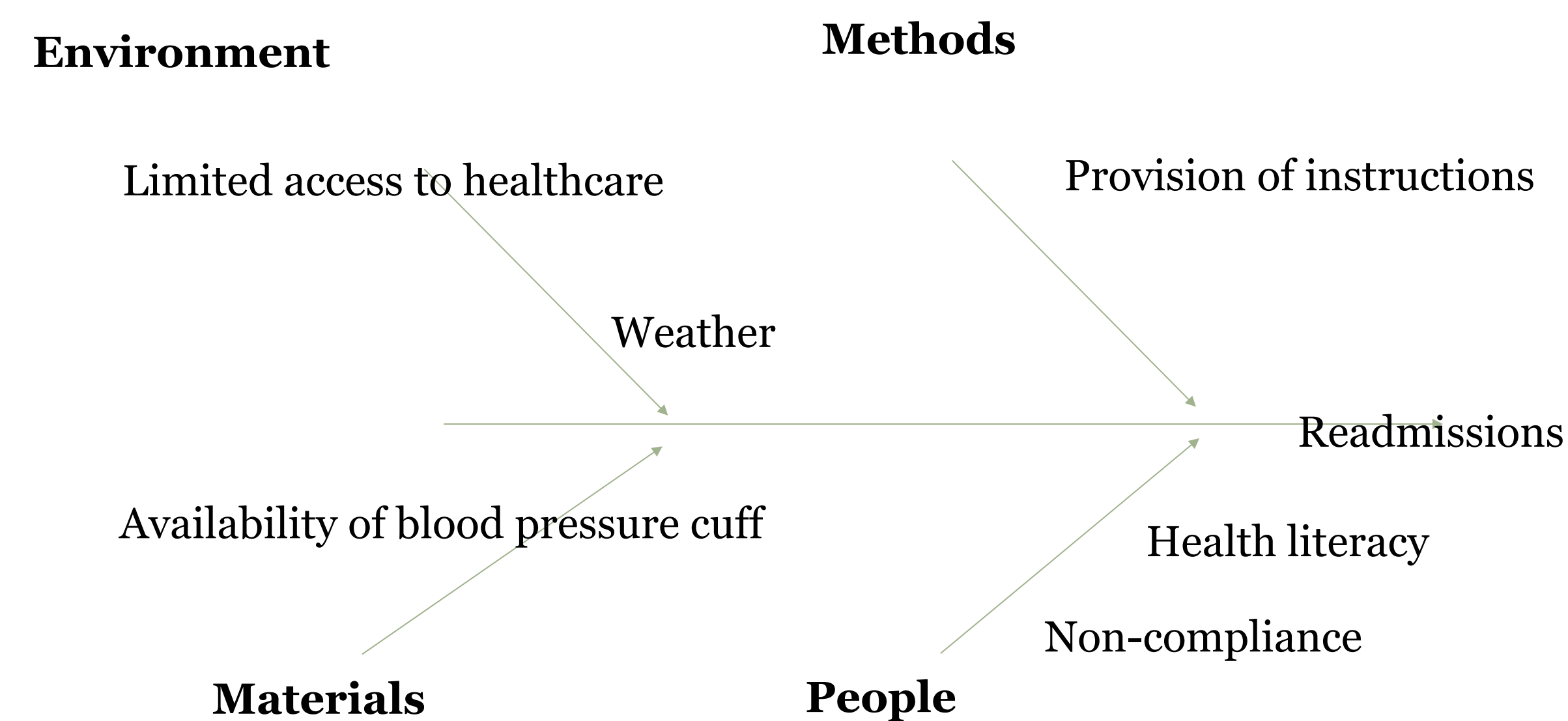


Figure 1. Fishbone diagram.

- Three separate interventions were taken:
 1. Dr. Cumming's Grand Rounds lecture about new BP criteria
 2. Creation of smart order sets with BP criteria
 3. Posting of informative sheet about BP guidelines in OB workroom and refresher at Dr. Noonan's Palladino Day lecture

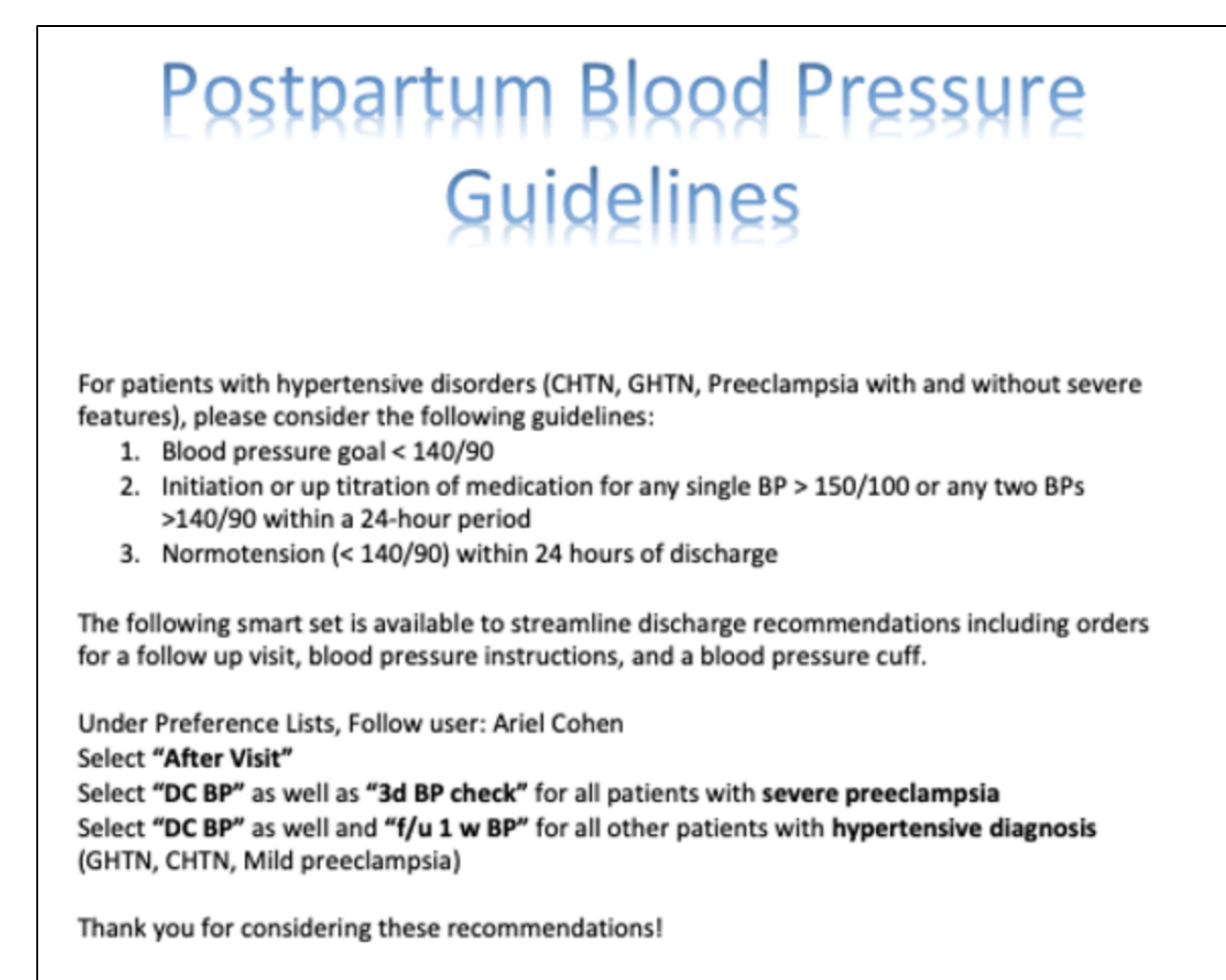


Figure 2. Informative sheet about BP guidelines.

RESULTS

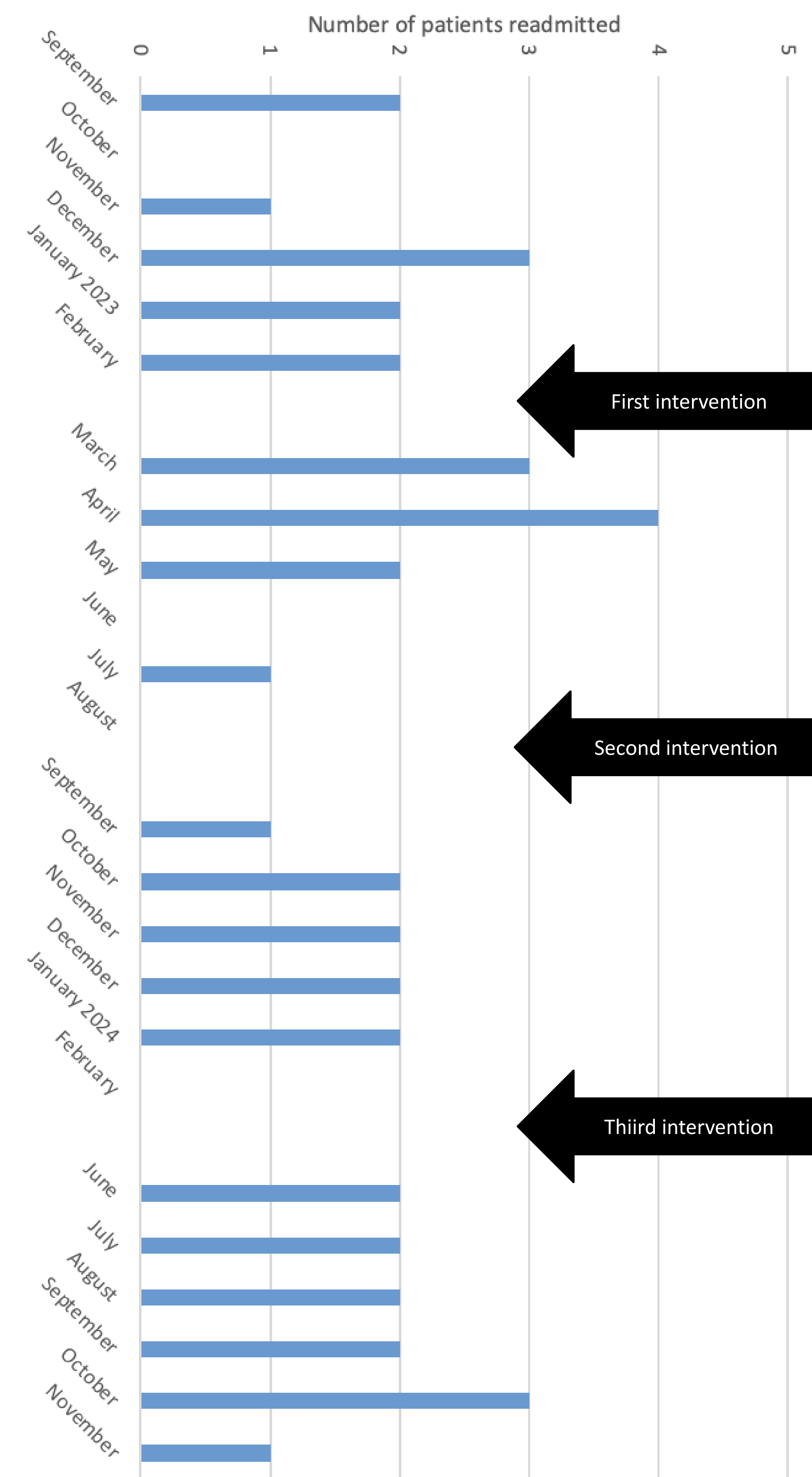


Figure 3. Readmission rates after all three interventions.

- Our results found that there was a slight decrease in readmission, however there was a significant increase in patient receiving appropriate discharge instructions, BP cuffs and medications as appropriate

SCALE UP PLAN

- Our plan for scaling up the impact of this project would be to extend this program to other hospitals within the WVU healthcare system

SUSTAINABILITY PLAN

- Our plan to maintain this improvement would be to continue to send the BP guidelines and educate new residents and students on service about these guidelines

LESSONS LEARNT

- From this project we learned the importance of standardized BP criteria for HDP
- We also learned that it is difficult to maintain compliance with having new attendings, residents and students on service every day
- We learned that smart order sets and notes do help with compliance
- We learned that if we wish to maintain improvements on service that constant reminders are needed