

**PRE - ECLAMPSIA with MODERATE HYPERTENSION**

**Hypertension 150-159/100-109**  
**WITH proteinuria  $\geq$  /+ or**  
PCR > 30mg/mmol  
and/or symptoms of pre-eclampsia

**Refer to DAU/ OTA**

- FBC, UEs, LFTs, urate,
- CTG
- BP Profile +urine PCR
- MEWS chart
- **Aim BP 150/80-100**  
with first line antihypertensive

**→ ADMIT**

**As an inpatient**

- BP control 150-80-100
- Consider steroids/ MgSO4
- 4 hrly BP check
- Daily urinalysis and 1 x PCR
- Growth USS, LV and umbilical artery doppler
- Consultant review

**Consultant Management Plan**

- Monitor growth
- Frequency of fetal monitoring
- PET bloods x3/wk
- Consider steroids / MgSO4 according to gestation
- Timing/mode of delivery

A full assessment of the patient should be performed:

Previous history of pre-eclampsia  
Previous pregnancy induced hypertension  
Pre-existing vascular or renal disease  
Gestational age at presentation

This should include assessment of risk factors:

First pregnancy  
Age  $\geq$ 40 years  
Pregnancy interval >10years  
BMI  $\geq$ 35 kg/m<sup>2</sup>  
Family history of pre-eclampsia  
Multiple pregnancy