



To Improve Discharge Planning of Patients with Pregnancy Induced Hypertension /Preeclampsia in Subsidized Obstetric Wards in KK Women's and Children's Hospital – a Residency Quality Improvement Project

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Introduction

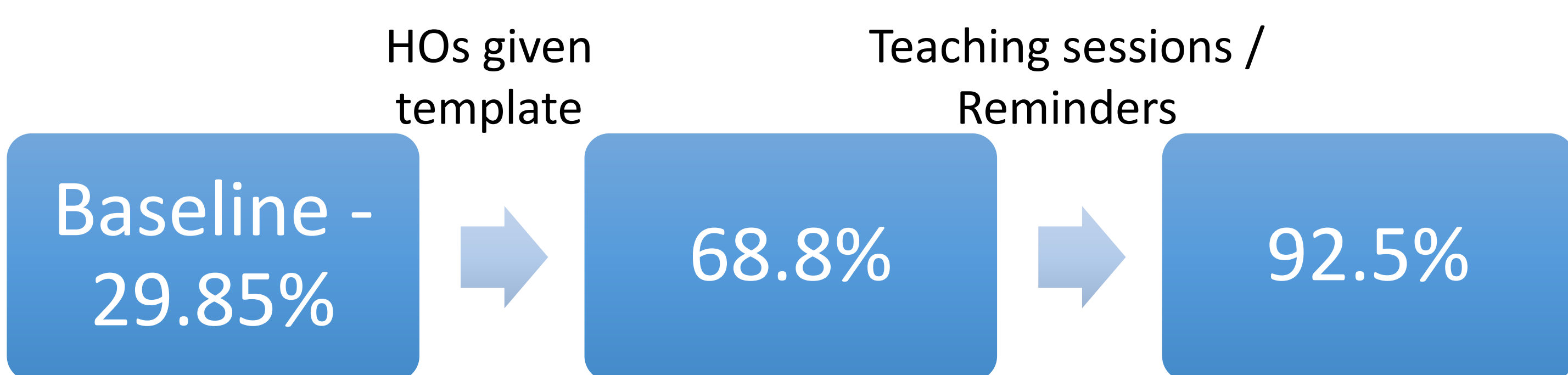
Postnatal patients with Pregnancy Induced Hypertension (PIH) / Preeclampsia (PE) are usually given a memo to the outpatient service (OPS) to check their blood pressure upon discharge. There is no standard format on information to be included in discharge memos, leading to possibly suboptimal follow-up and management.

Objectives

To ensure discharge memos of PIH/PE patients contain 100% of the relevant information that a primary health care practitioner needs in the outpatient management.

Results

Accuracy Rate



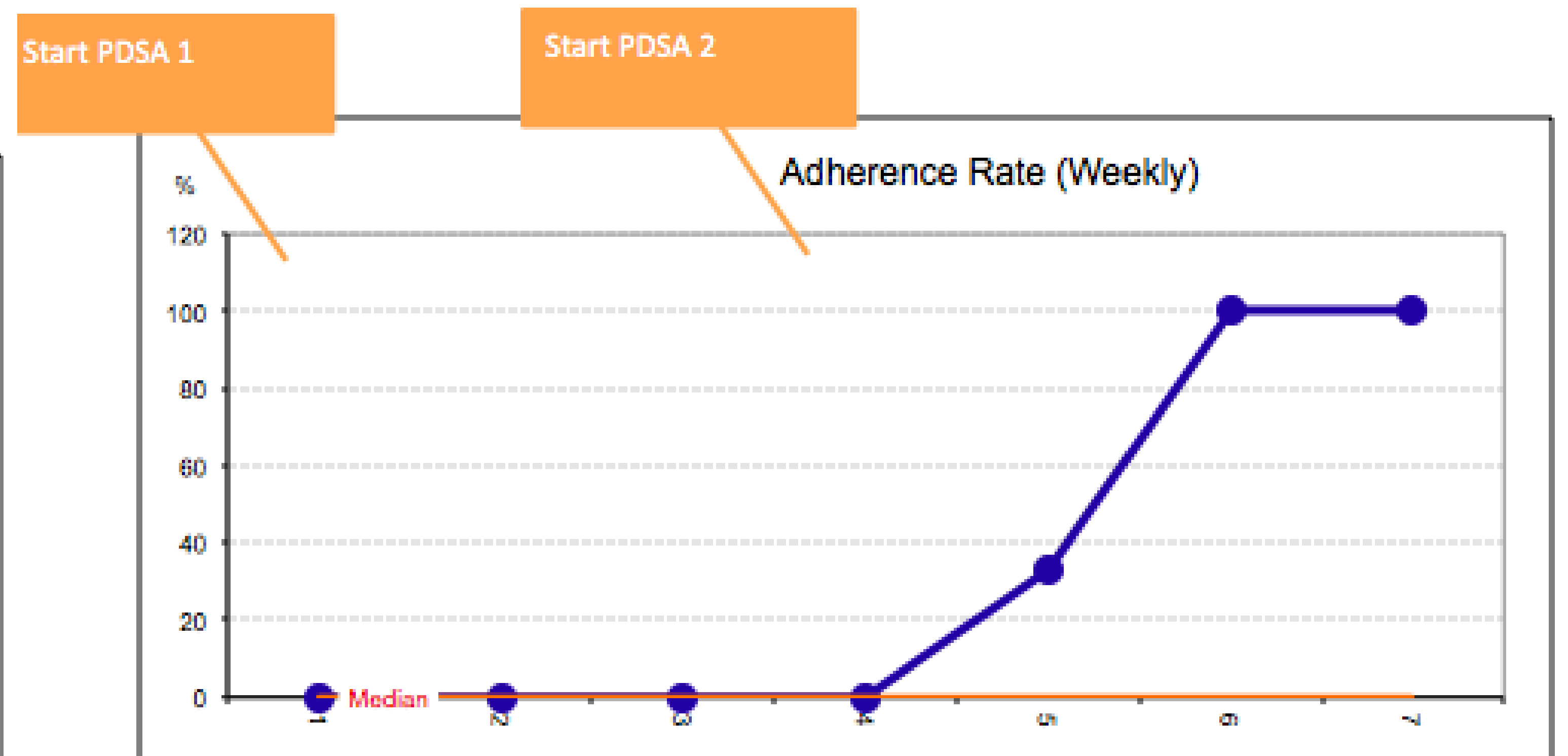
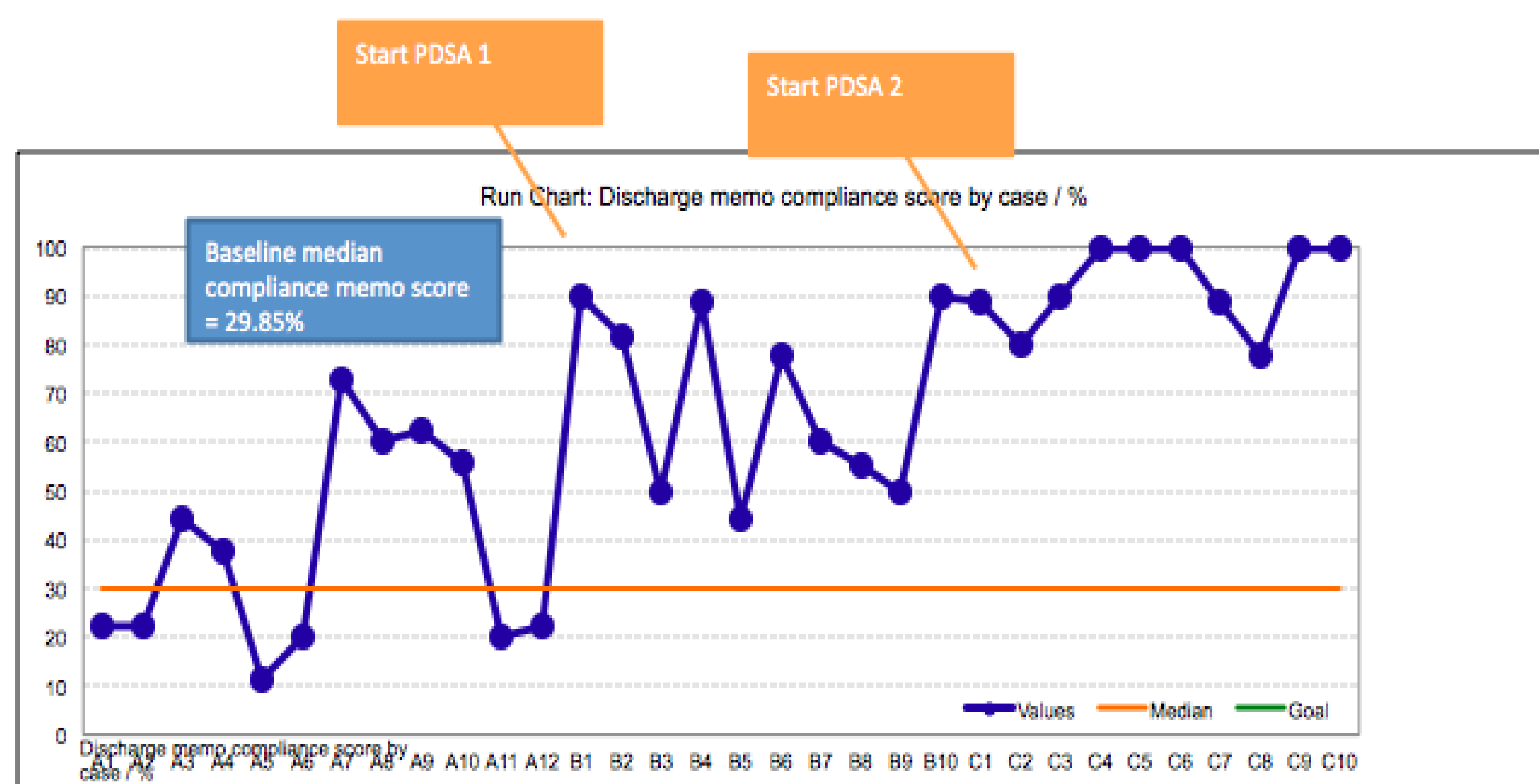
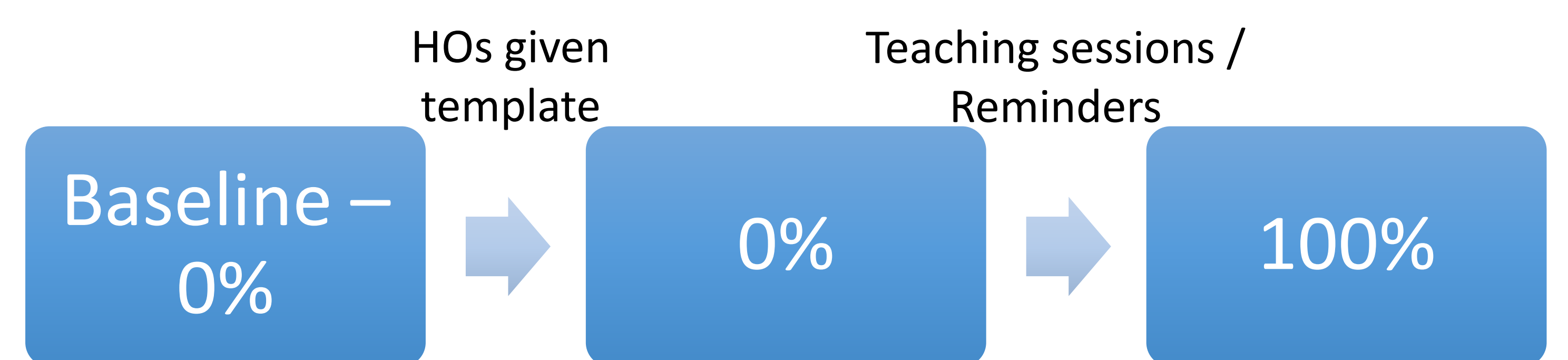
Methodology

• Memos written by House officers for all postnatal PIH/PE in the subsidized obstetric wards in KK Hospital on randomized days over 6 months were audited based on 11 points below :

BP monitoring frequency	Maternal medical conditions (eg. ITP, GDM)
Target BP range	Current medications (if any)
Delivery date	Abnormal results for followup (if any)
Mode of delivery	For PE patients - to indicate if repeat Urine albumin test is required 6 weeks postnatal
Indication of delivery	When to seek help - optimal BP range, symptoms of Impending Eclampsia
Gestational age at delivery	

- Each criteria that the memo fulfills will be checked off
- Points scored / (Total points – points not applicable); scored with a full score of 100%
- Accuracy Rate = % of the 11 criteria it fulfills
- Adherence Rate = % of memos fulfilling all 11 criterias
- PDSA 1 - We provided HOs with a template, and gave formal teaching sessions
- PDSA 2 - Constant reminders (verbal, emails) regarding PIH/PE and template usage provided

Adherence Rate



Conclusion

Sustainability can be achieved by:

- Continual education of House officers / Family medicine residents
- Providing a comprehensive discharge memo template in the HO orientation guide book
- Monitor results via periodic audits
- Extrapolating memo templates to the private Obstetric wards