

COVID 19 home Blood pressure monitoring

Goal to reduce in person visits. Cuff supply is low. Follow ANMC HTN Guideline

Place REFERRAL to OBGYN clinic on discharge with details: PHONE f/u on day # ____

If it needs to be done over the weekend- Send message to weekend Resource CNM

Antepartum patients:

Preeclampsia and gestational hypertension from time of diagnosis

-Rx for monitor or given home BP monitor

-Once weekly antenatal testing/provider visit and daily home BP monitoring

Postpartum:

Level of risk: from high to low

Highest:

Preeclampsia/Superimposed with any severe BP or severe features

-In person visit at day 3 and then day 7-10 (Physician visit or CNM with physician consultation)

-Village CO to remain in Anchorage when possible to minimize multiple travel locations

-Sub regional could go home for their day 7-10 check

Moderate:

Preeclampsia/Superimposed without severe features AND no severe range BPS during admission

-Rx for home monitor or given home BP monitor

-Provider call day 3 and day 7-10 (Clinic Provider weekdays, Resource CNM weekends)

-CO to remain in Anchorage for day 3 call. All can go home for their day 7-10 call

Low:

GHTN, CHTN- no severe range BP intrapartum

-Routine postpartum care

**If severe range BP antepartum moves into HIGHEST risk and requires in person visit

Home monitors- **patient must be able to demonstrate how to perform home checks**

Teaching and a handout- take six times a day. Warning signs and phone numbers

Paper RX on discharge if patient has insurance other than Medicaid and has transportation to fill at Geneva Woods