Improvement of Preeclampsia Outcomes

Mariah Cornett, Rebecca Davis, Kaylie Harris, Abigail Mahlman, Brooke O'Toole

Introduction

PICOT

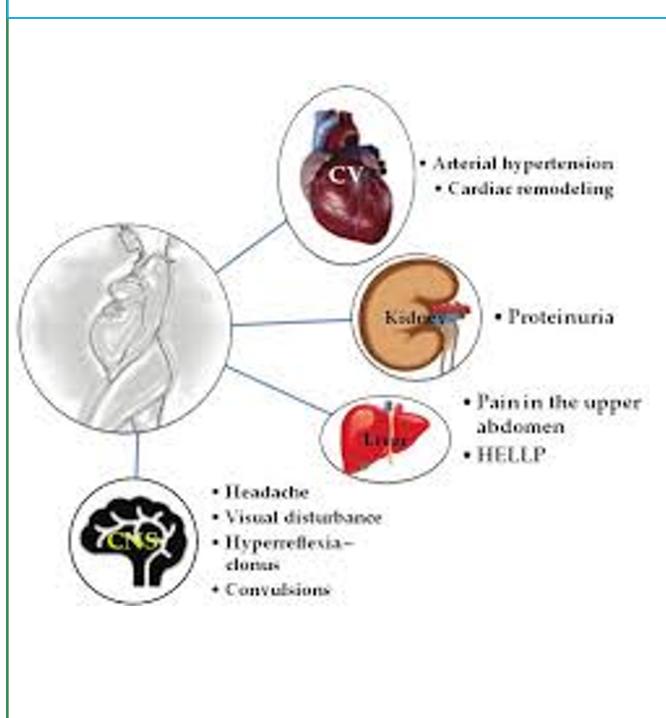
• In nurses who take care of preeclampsia women how does education on preeclampsia management and care compare with no supplemental education on preeclampsia management and care affect nurses knowledge on the management and care of preeclampsia

Literature Search

Databases: CINHAL, Scopus, PubMed

Search parameters: peer reviewed articles, published within the past 5 years

Keywords: preeclampsia, education, magnesium sulfate, early education, prenatal care, aspirin, labetalol, seizure precautions, gestational hypertension, diagnosis, prevention, screening, nifedipine,



Current Evidence

We included 16 Article

 The frequency of Antenatal Care eff and fetal outcomes

 Accurate BP measurement is essen and timely care

- A daily aspirin prevents preeclampsi
- Proper 24hr Urine Collection is esse diagnose preeclampsia
- Magnesium Sulfate first line drug
- Oral Nifedipine recommended over
- Oral Diltiazem recommended over o

 Nursing staff and patients show a signal knowledge and education regarding signs and symptoms as well as mana

Outcomes

 When comparing the data between the data bet and post assessments, there was increase in knowledge after review educational PowerPoint. Nurses h more educated on care and mana preeclampsia, which will in turn w preeclamptic patient outcomes.

Lessons Learned:

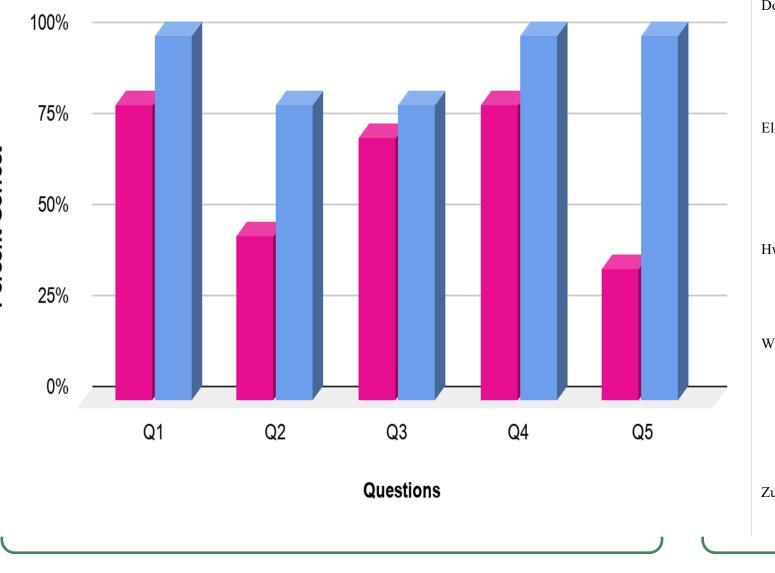
• We could have presented to antepartum and L&D floors within the same hospital to determine similarities and differences between knowledge

• Further studies could be done on preeclamptic patient outcomes after nurses have been educated consistently.

• Increasing the amount of education given on preeclampsia to obstetric nurses

 study differences on types of educational material given among hospitals for most effective outcomes

<u>ce</u>	Education Plan		Pre and Po
les ffects maternal ential to correct	Place: UCMC & Good Samaritan Hospital Presented to: Nursing Staff on Labor and Delivery/Antepartum units	1.	What is the Magnesium women?
sia sential to r IV Labetalol	Purpose: To educate nurses on preeclampsia patient education, management, treatment, and inpatient nursing care. Objectives:	2.	When meas arms are co pressures (do?
oral Nifedipine significant lack of preeclampsia nagement.	 Nurses to feel confident in educating their patient on Preeclampsia management and care Be able to understand how to take an accurate blood pressure reading Be able to understand how to collect a 24-hour urine test properly Be able to understand and discuss the various types of medications used for preeclamptic patients 	3.	What effect preeclamps patients? (S
		4.	When shou pregnant w preventativ
veen our pre s a significant ewing our	Method: Emailed educational PowerPointpresentation video to nurses to watch. Supplied linksto pre and post test to assess knowledge known andgained	5.	What are so effects of N
had become agement of will improve	I Improvement in Correct Responses Between Pre and Post Pre Test Post Test	Test	Alnuaimi, K., Abuidhail, J., & programme about pr
	100%		Doğan,, S., Sel, G., İlker Arıkan, June 10). Accuracy of the



Zulfeen, M., Tatapudi, R., & Sowjanya, R. (2019). IV labetalol and oral nifedipine in acute control of severe hypertension in pregnancy-A randomized controlled trial. European Journal of Obstetrics & Gynecology and Reproductive Biology, 236, 46-52. doi:10.1016/j.ejogrb.2019.01.022

doi:10.111/jog.13031

Post Test Questions

e purpose of using m Sulfate in preeclamptic

asuring blood pressure, if both consistently reporting different (<10 mmHG) what should you

ect does education programs on psia have for preeclamptic (SATA)

ould at risk preeclampsia women begin using aspirin as a ive measure?

some of the serious side **Nifedipine? (SATA)**

References

& Abuzaid, H. (2020, September 22). The effects of an educational preeclampsia on women's awareness: A randomised control trial.

n, n., İbrahim Harma, M., Harma, M., Barut, A., & Özmen, l. (2019, the 24-h urine protein excretion value in patients with preeclampsia: correlation wiht instant and 24-h urine protein/creatinine and albumin/creatinine ratios. Journal of Obstetrics and Genecology, 1074-1080. doi:10.1080/01443615.2019.1586854

El-Sayed Azzaz, A. S., Martinez-Maestre, M. A., & Torrejon-Cardoso, R. (2016). Antenatal care visits during pregnancy and their effect on maternal and fetal outcomes in pre-eclamptic patients. Japan Society of Obstetrics and Gynecology, 42(9), 1102-1110.

Hwang, K. O., Aigbe, A., Ju, H., Jackson, V. C., & Sedlock, E. W. (2018). Barriers to Accurate Blood Pressure Measurement in the Medical Office. Journal of Primary care and *Community Health*, 9(1-7). doi:10.1177/215013271

Wright, D., Poon, L. C., Rolnik, D. L., Syngelaki, A., Delgado, J. L., Vojtassakova, D., ... Nicolaides, K. H. (2017). Aspirin for evidence-based preeclampsia prevention trial: Influence of compliance on beneficial effect of aspirin in prevention of preterm preeclampsia. American Journal of Obstetrics and Gynecology, 217(6). https://doi.org/10.1016/j.ajog.2017.08.110