

**APPENDIX A: SAMPLE DISCHARGE SHEET FOR HYPERTENSIVE DISORDER PATIENTS**

**Instructions for Patients with Diagnosis of Preeclampsia, HELLP Syndrome or Eclampsia**

It is very important for you to follow doctor instructions and pay careful attention to any symptoms you may have. For up to 6 weeks after delivery you are still at risk for emergencies related to your high blood pressure in the hospital. You have been given information about this condition—Yes \_\_\_\_, No \_\_\_\_.

**Get emergency care if you have shortness of breath, headache, seizures, pain in the upper stomach area, or high blood pressure.**

**Do not wait to get care, it could be a matter of life or death. Take this information with you and tell the doctor you had a baby on \_\_\_\_\_.**

Take your Medicines as ordered (be sure to get them from the drug store as you leave the hospital):

- 1) \_\_\_\_\_ To be taken every \_\_\_\_ hours. Next dose due: \_\_\_\_\_
- 2) \_\_\_\_\_ To be taken every \_\_\_\_ hours. Next dose due: \_\_\_\_\_
- 3) \_\_\_\_\_ To be taken every \_\_\_\_ hours. Next dose due: \_\_\_\_\_

Your follow-up appointment has been made with Dr. \_\_\_\_\_ in \_\_\_\_ days.

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**It is important to keep this appointment.**

You have been instructed to check your blood pressure at home daily: Yes\_\_\_\_ No\_\_\_\_

If your blood pressure is greater than 140 systolic (top number) and/or greater than 90 diastolic (bottom number), **call** your healthcare provider \_\_\_\_\_

Phone Number: \_\_\_\_\_ and if you cannot reach them, go to the emergency room.

**APPENDIX B: SAMPLE DISCHARGE INSTRUCTIONS FOR ALL PATIENTS WHO HAVE BEEN PREGNANT****Discharge Instructions for All Patients who have been Pregnant**

It is very important for you to follow doctor instructions and pay careful attention to any symptoms you may have. For up to 6 weeks after delivery you are at risk for emergencies related to your pregnancy.

**Get emergency care if you have shortness of breath, headache, seizures, pain in the upper stomach area, or high blood pressure.**

**Do not wait to get care, it could be life threatening. Take this information with you and tell the doctor you had a baby on \_\_\_\_\_.**

Take your Medicines as ordered (be sure to get them from the drug store as you leave the hospital):

1) \_\_\_\_\_ To be taken every \_\_\_\_ hours. Next dose due: \_\_\_\_\_

2) \_\_\_\_\_ To be taken every \_\_\_\_ hours. Next dose due: \_\_\_\_\_

3) \_\_\_\_\_ To be taken every \_\_\_\_ hours. Next dose due: \_\_\_\_\_

Your follow-up appointment has been made with Dr. \_\_\_\_\_ in \_\_\_\_ days.

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**It is important to keep this appointment.**

You have been instructed to check your blood pressure at home daily: Yes \_\_\_\_ No \_\_\_\_

If your blood pressure is greater than 140 systolic (top number) and/or greater than 90 diastolic (bottom number), **call** your healthcare provider \_\_\_\_\_

Phone Number: \_\_\_\_\_ and if you cannot reach them, go to the emergency room.