Maternal Cardiac Round Table

DOULA SCENARIO

Janelle is a 28 yo African American female, G3P3 with a BMI of 43 who is having a visit with her doula at 5 weeks postpartum to check on her and the baby.

Current Medication:

She is taking Nifedipine 60XL for hypertension

Current Vital Signs

B/P is 145/89 (forearm) with home B/P machine Heart rate is 118 bpm

Janelle complains that she has to sleep in a recliner and can't sleep lying down in bed.

The doula reassures Janelle that she probably just anxious about the new baby and that is the reason she can't get comfortable lying down.

Janelle tells the doula that she has an appointment with Family Medicine for management of her hypertension in two weeks.

Two weeks later the patient is brought to the Emergency Department by EMS and codes. She is unable to be resuscitated.

Autopsy reveals cardiomyopathy.







1.	a. Should this be any different if Janelle were 3, 6, 9, or 11 months postpartum?
2.	What interventions could you implement to help aid in CVD screening? (educating providers and nursing about screening, posters, badge buddies, EHR screening, etc.)
3.	Who do you need to engage to help make universal CVD screening a reality? (Be specific- write names and email addresses)
4.	What will you commit to implementing over the next 6 months to increase CVD screening in pregnancy and postpartum? (think small interventions initially, that lead to larger interventions)
5.	What are the first next steps you need to take to make this happen.
6.	Create a timeline for implementation: 1 month, 3 months, 6 months, 12 months