| by discharge only Please complete the following information: Maternal characteristics and tests Maternal Age Gestational age at diagnosis Tick any applicable maternal pre-existing conditions Hypertension Renal disease Diabestes meelitus Autoimmune disease |
|--|
| Maternal characteristics and tests Maternal Age year Gestational age at diagnosis weeks days Tick any applicable maternal pre-existing conditions Hypertension Renal disease Diabestes meelitus |
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| ☐ Hypertension ☐ Renal disease ☐ Diabestes meelitus |
| Renal disease Diabestes meelitus |
| ☐ Diabestes meelitus |
| |
| ☐ Autoimmune disease |
| |
| Previous occurrence of pre-eclampsia |
| Systolic blood pressure mmHg |
| Platelet count 10^9/L |
| Serum urea mmol/L |
| Protein creatinine ratio mg/mmol |
| Which treatment did the mother receive at diagnosis or within 24hour |
| Any antihypertensive MgSO4 |
| |
| The adverse event risk of this women by discharge is: |
| , , , , , |