

## Maternal cardiovascular health How to differentiate normal from problematic

RISK FACTORS (see list on back)Absent/mildPresentSTOP Prompt evaluationRISK FACTORS (see list on back)Absent/mildPresentPresentHISTORY OF CARDIOVASCULAR DISEASENoneNoneNoneSELF-REPORTED SYMPTOMSNone or mildYesYesShortness of breathNo interference with daily activities, with resolves with treatmentWith moderate exertion, new onset asthma, mederate to severe OSAAt rest, paroxysmal nocturnal dyspnea, infiltrates on CXRChest painReflux related that resolves with treatmentAtypicalAt rest or with minimal exertionPalpitationsFew seconds, self-limited episodes, or syncopeAssociated with neer syncopeSyncopeDizziness only with prolonged standing or dehydrationVasovagalExertional or unprovokedVITAL SIGNSNormalAbnormalAbnormalPulse (beats per minute)< 9090 to 119> 120Systolic BP120 to 139140 to 159>160 (or symptomatic low BP)Respirations (per minute)> 97%95 to 97%< 95% (unless chronic)PHYSICAL EXAMNormalAbnormalAbnormalJugular vein distention (JVD)Not visibleNot visibleVisible > 2 cm diose clavicleHeartS3, barely audible soft systolic murmur, diastelic murmur, diastelic murmur, diastelic murmur, systolic murmurS3, systolic murmurLoud systolic murmur, diastelic murmur, faJugular vein distention (JVD)Not visibleNot weating, crockles, effici				
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DISEASENoneNoneYesSELF-REPORTED SYMPTOMSNone or mildYesYesShortness of breathNo interference with daily activities, with heavy exertion onlyWith moderate exertion, persistent cough, or moderate to severe OSAAt rest, paroxysmal nocturnal dyspnec, bilderal chest infiltrates on CXRChest painReflux related that resolves with treatmentAtypicalAt rest or with minimal exertionPalpitationsReflux related that resolves with treatmentAtypicalAt rest or with minimal exertionSyncopeDizziness only with prolonged standing or dehydrationBrief, self-limitedAssociated with near syncopeSyncopeDizziness only with prolonged standing or dehydrationWasovagalExertional or unprovokedYITAL SIGNSNormalAbnormalAbnormalPulse (beats per minute)< 90	<b>RISK FACTORS</b> (see list on back)	Absent/mild	Present	Present
Shortness of breathNo interference with daily activities, with heavy exertion only persistent cough, or moderate to severe OSAAt rest, paroxysmal nocturnal dyspnea, bilateral chest infiltrates on CXRChest painReflux related that resolves with treatmentAtypicalAt rest or with minimal exertionPalpitationsFew seconds, self-limitedBrief, self-limited or dyntheadeded, no lightheadedededes or syncopeAssociated with near syncopeSyncopeDizziness only with prolonged standing or dehydrationVasovagalExertional or unprovokedFatigueMildMild to moderateExtremeVITAL SIGNSNormalAbnormalAbnormalPulse (beats per minute)< 90		None	None	Yes
Shortness of breathNo Interference with daily activities, with heavy exertion onlynew onset asthma, persistent cough, or bilateral chest, bilateral chest bilateral chestPalpitationsReflux related that resolves with treatment resolves with treatment resolves with treatment bilateral chest bilateral ch	SELF-REPORTED SYMPTOMS	None or mild	Yes	Yes
Chest painresolves with treatmentAtypicalminimal exertionPalpitationsFew seconds, self-limitedBrief, self-limited episodes, no lightheadedness or syncopeAssociated with near syncopeSyncopeDizziness only with prolonged standing or dehydrationVasovagalExertional or unprovokedFatigueMildMild to moderateExertional or unprovokedVITAL SIGNSNormalAbnormalAbnormalPulse (beats per minute)< 90	Shortness of breath	daily activities, with	new onset asthma, persistent cough, or	nocturnal dyspnea, bilateral chest
PalpitationsFew seconds, self-limitedepisodes, no lightheadedness or syncopeAssociated with near syncopeSyncopeDizziness only with prolonged standing or dehydrationVasovagalExertional or 	Chest pain		Atypical	
Syncopeprolonged standing or dehydrationVasovagalExertional of unprovokedFatigueMildMild to moderateExtremeVITAL SIGNSNormalAbnormalAbnormalPulse (beats per minute)< 90	Palpitations		episodes, no lightheadedness	
VITAL SIGNSNormalAbnormalAbnormalPulse (beats per minute)< 90	Syncope	prolonged standing	Vasovagal	
Pulse (beats per minute)< 9090 to 119> 120Systolic BP120 to 139140 to 159> 160 (or symptomatic low BP)Respirations (per minute)12 to 1516 to 25> 25Oxygen saturation> 97%95 to 97%< 95% (unless chronic)	Fatigue	Mild	Mild to moderate	Extreme
Systolic BP120 to 139140 to 159> 160 (or symptomatic low BP)Respirations (per minute)12 to 1516 to 25> 25Oxygen saturation> 97%95 to 97%< 95% (unless chronic)	VITAL SIGNS	Normal	Abnormal	Abnormal
Systolic BP120 10 139140 10 139160 15910 w BP)Respirations (per minute)12 to 1516 to 25> 25Oxygen saturation> 97%95 to 97%< 95% (unless chronic)	Pulse (beats per minute)	< 90	90 to 119	> 120
Oxygen saturation> 97%95 to 97%< 95% (unless chronic)PHYSICAL EXAMNormalAbnormalAbnormalJugular vein distention (JVD)Not visibleNot visibleVisible > 2 cm above clavicleHeartS3, barely audible soft systolic murmurS3, systolic murmurLoud systolic murmur, S4LungsClearClearWheezing, crackles, effusion	Systolic BP	120 to 139	140 to 159	
PHYSICAL EXAMNormalAbnormalAbnormalJugular vein distention (JVD)Not visibleNot visibleVisible > 2 cm above clavicleHeartS3, barely audible soft systolic murmurS3, systolic murmurLoud systolic murmur, diastolic murmur, S4LungsClearClearWheezing, crackles, effusion	Respirations (per minute)	12 to 15	16 to 25	> 25
Jugular vein distention (JVD)Not visibleNot visibleVisible > 2 cm above clavicleHeart\$3, barely audible soft systolic murmur\$3, systolic murmurLoud systolic murmur, diastolic murmur, S4LungsClearClearWheezing, crackles, effusion	Oxygen saturation	> 97%	95 to 97%	< 95% (unless chronic)
Jugular vein distention (JVD)Not visibleNot visibleNot visibleabove clavicleHeartS3, barely audible soft systolic murmurS3, systolic murmurLoud systolic murmur, diastolic murmur, S4LungsClearClearWheezing, crackles, effusion	PHYSICAL EXAM	Normal	Abnormal	Abnormal
Hearings Clear Clear Clear Wheezing, crackles, effusion	Jugular vein distention (JVD)	Not visible	Not visible	
Lungs Clear Clear crackles, effusion	Heart		S3, systolic murmur	
Edema Mild Moderate Marked	Lungs	Clear	Clear	
	Edema	Mild	Moderate	Marked



## **RISK FACTORS FOR MATERNAL CARDIOVASCULAR DISEASE:**

- Mother is older than 35
- Mother is Black and non-Hispanic
- Mother has obesity
- Presence of a hypertensive disorder in pregnancy (preeclampsia, eclampsia, HELLP syndrome)
- Presence of chronic hypertension
- Presence of diabetes mellitus and gestational diabetes
- Mother has substance use disorder (in other words, uses alcohol, cocaine, methamphetamines)

- Mother uses tobacco
- Strong family history of cardiovascular disease
- History of coronary artery dissection
- IUGR < 5%
- History of placental abruption
- Blood transfusion postpartum
- Peripartum infection

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NYWEST-003408-22