

SA PPG upload to SA Health Website and Practice Guidelines Web-Based App

Date uploaded: 20/5/19

Title of PPG (previous title if applicable)	Revised or New	Summary of key points / changes	Risk management concerns +/- budget implications
<p>Hypertensive Disorders in Pregnancy</p> <p>(Also now encompassing the following PPGs)</p> <ul style="list-style-type: none"> - Blood Pressure (recording) in Pregnancy - Fluid Management and Monitoring in Severe Preeclampsia - Labetalol Infusion Regimen - Hydralazine Infusion Regimen - Magnesium Sulphate Infusion Regimen 	Revised	<p>Complete review. Major changes include:</p> <ul style="list-style-type: none"> • Simplified to aid ease of application. • Flowcharts for management of severe hypertension, preeclampsia and initial eclampsia management now included. <p>IV infusion regimens for labetalol, hydralazine and magnesium sulphate now added as appendices and are simplified when compared to the previous separate PPGs. The separate medication PPGs and their A-Z listing have been removed.</p>	All staff will need education re infusion regimens location in Hypertensive PPG.
<p>Vitamin D Status in Pregnancy</p> <p>Previous title: Vitamin D Deficiency</p>	Revised	<p>Complete review. Major changes include:</p> <ul style="list-style-type: none"> • Routine supplementation now recommended for all women in pregnancy • Addition of information re vitamin D content of common pregnancy multivitamins • Supplementation of 'at risk' infants based on maternal vitamin D status recommended • Fact sheets for routine supplementation in pregnancy, supplementation for vitamin D insufficiency/deficiency and neonatal supplementation developed and included • Addition of flowcharts for both women and neonates • Link to Paediatric Clinical Practice Guideline for ongoing management of vitamin D deficiency in the infant included • Revision of Neonatal Medication Guidelines <i>Colecalciferol</i> and <i>Multivitamins</i> occurred concurrently to ensure consistency 	All staff will need education re move to routine supplementation for all women. Potential increased printing costs to give information to all women.