**APPENDIX 1. Independently Reviewed Documents Standardized Worksheet**

**Country:**

**Source of Data:**

**PE/E**

Severe PE: DBP>=110mmHg, > 20wks; prtnria >-3+:

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Del w/in 24hr of sx: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Eclampsia: Cnvlsn, Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Del w/in 12hr of sx: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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**PE/E Treatment**

Loading - MgS04

(1) 4g MgS04 IV (20mL 20%) ≥ 5min:

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(&) 10g MgS04 (10mL 50%) 5g q butt.:

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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If unable IV – IM only: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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If cnvl recur after 15min: 2g MgS04 IV:

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Loading – Diazepam

(1) Diazepam 10mg IV ≥ 2min: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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If cnvl recur: repeat: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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(OR) Diazepam 20mg in 10mL syringe rectally, hold together x 10min or via catheter:

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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If cnvl recur: repeat: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Maintain – MgS04

5g 50% MgS04 IM q buttocks q4hrs

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Cont. MgS04 x24hrs or last cnvl:

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Before giving MgS04 check: DTR, UOP > 100mL/4hrs, RR >=16/min: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Maintain – Diazepam

Diazepam 40mg/500mL IV: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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**Tx of** **HTN in PE/E**

Tx if DBP > 110mmHg: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hydralazine is primary drug: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Give hydralazine 5mg IV (3-4min):

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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If no IV, give 12.5mg IM q 2hrs: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Alternative

Nifedipine 5mg sublingual: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Other HTN tx: Y:\_\_\_\_; N:\_\_\_\_; pg#\_\_\_\_

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**AMTSL**

Give oxy 10 IU IM w/in 1min: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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If no oxy, give ergo 0.2mg IM/IV slw:

Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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(OR) Miso 600mcg oral/SL: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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CCT w/countertraction: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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Aftr dlvry of plcnta Imd. Ut. mass. & chck q15 minx2 hrs: Y:\_\_\_\_; N:\_\_\_\_;I\_\_\_\_; pg#\_\_\_\_

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**APPENDIX 2. Jointly Reviewed Documents Standardized Worksheet**

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| **Topic:** | **Question/Responses:** | **Notes:** |
| Country: |  |  |
| Source(s):  |  |  |
| **PE/E Treatment** |  |
| Loading - MgS04 | 4g MgS04 IV (20mL 20%) ≥ 5min: Y:N:I:pg#: |  |
| 10g MgS04 (10mL 50%) 5g q buttocks:Y:N:I:pg#: |  |
| Loading – Diazepam | Diazepam 10mg IV ≥ 2min: Y:N:I:pg#: |  |
| Maintain – MgS04 | 5g 50% MgS04 IM q buttocks q4hrs Y:N:I:pg#: |  |
| Maintain – Diazepam | Diazepam 40mg/500mL IV: Y:N:I:pg#: |  |
| **Treatment of** **HTN in PE/E** |  |
| Medication(s) used | Medication:Dose:Route of Administration:pg#: |  |
|  | Medication:Dose:Route of Administration:pg#: |  |
|  | Medication:Dose:Route of Administration:pg#: |  |
| **AMTSL** |  |
| Components of AMTSL | Give oxy 10 IU IM w/in 1min: Y:N:I:pg#: |  |
|  | Guidelines for CCT: Y:N:I:pg#: |  |
|  | Immediate uterine massage:Y:N:I:pg#: |  |
| Misoprostol for prevention of PPH | Guidelines present?Y:N:I:pg#:Dose:Route of Administration: |  |