

Department  
Hospital  
Address  
Address  
Address  
Tel  
Fax  
E-mail

Recipient's Name  
Address  
Address  
Address  
Post Code

Date :  
Your Ref :  
Our Ref :  
Enquiries to:  
Extension :  
Direct Line :

Dear Dr

The above patient has been discharged on the following antihypertensive medication(s) for pregnancy induced hypertension/preeclampsia.

One weeks' supply has been given to the patient.

We have advised the patient

- To contact you for review within this timeframe so that any ongoing treatment can be prescribed or altered as necessary.
- Not to stop this medication
- That blood pressure (BP) should be measured every 1-2 days by the community midwife or GP in the first 2 weeks following delivery.
- To report any unusual symptoms such as headache or blurred vision promptly to the community midwife or GP which may be sign of rising blood pressure.

We would appreciate if you would

- Refer to hospital for review if BP > 150/100 mmHg.
- Consider reducing the dose of medication if BP <140/90 mmHg.
- Reduce the dose or stop medication if BP is <130/80 mmHg.

There is currently insufficient evidence for the safety of the following drugs and breast feeding: amlodipine, angiotensin receptor blockers (ARBs) and angiotensin converting enzyme (ACE) inhibitors, other than enalapril or captopril which can be used safely in term infants.

We expect that for most women blood pressure will return to normal levels within six weeks following delivery, although it can take up to 12 weeks. If this does not occur you may wish to investigate this further or make a referral to the hypertension clinic. Hypertension in pregnancy has implications for long term cardiovascular health.

[Yours etc]

[Signatory]

[Encs]

