



Coordinating postpartum cardiac care for patients with preterm preeclampsia: maternal healthcare provider perspectives



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Objective

- To document maternal healthcare providers' perspectives on coordinating care for birthing people who experienced preterm preeclampsia with severe features and were referred to an innovative postpartum clinic for cardiac risk stratification

Study Design

- Maternal healthcare providers completed a semi-structured interview between March 2022 to May 2022
- Providers were approached for participation based on their involvement in delivering care for birthing people with preeclampsia
- The interviews were audio-recorded, professionally transcribed, and checked for accuracy
- Responses were iteratively coded for inductive narrative analysis

Results

Maternal Care Providers	n=10
Obstetrician	4
Nurse	2
Family Medicine Physician	1
Advanced Practice Provider	1
Certified Nurse Midwife	1
Pregnancy Coordinator	1
Non-Hispanic White	9
Preferred Not to Identify Race/Ethnicity	1

Table 1: Demographics of Study Participants.

- The patient populations served were diverse in payer status, acuity, rurality, and primary language
- Support for referrals, sensitivity to patient priorities, and clarification of clinical workflow all emerged as themes (Table 2)
- Collectively, providers deemed the patient experience of utmost priority when coordinating postpartum cardiac care (Figure 1)

Themes

Support for Referrals

- Requested assistance on how best to refer patients.
- Suggested administrative support to make appointments.
- Recommended engagement of social work and care coordination to address patient barriers.

Sensitivity to patient priorities

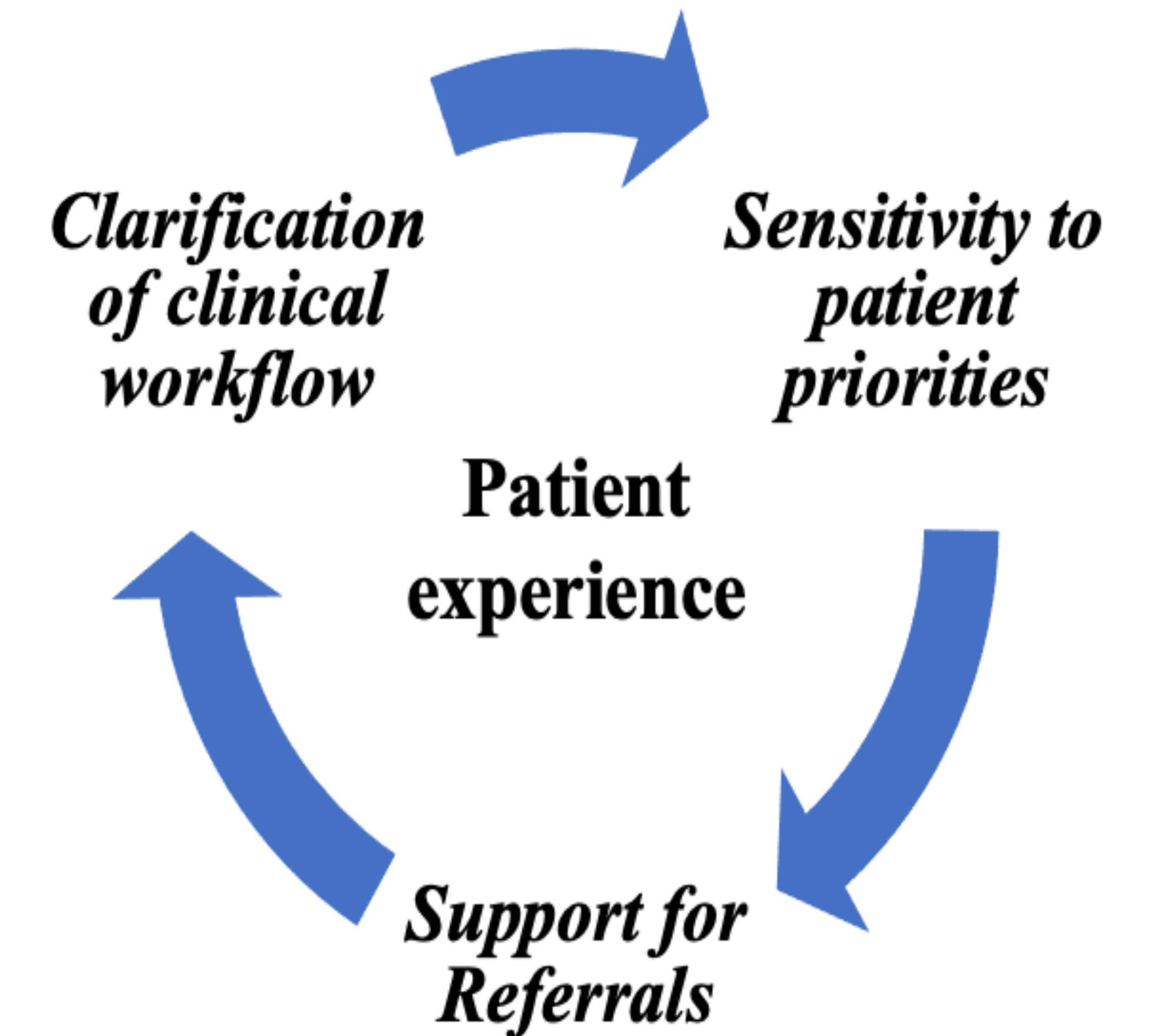
- Indicated that engagement with patients around postpartum cardiac health should occur early and frequently.
- Considered the timing of postpartum healthcare service communication in relation to patient experiences.
- Contemplated strengthening the system of care away from a patchwork of services to a holistic approach.

Clarification of clinical workflow

- Desired more clarity on clinic scope and differentiation from other postpartum care visits to communicate value to patients.
- Sought bidirectional feedback to streamline workflow and patient appropriateness for referral.
- Advocated for the standardization patient management in the postpartum discharge transition in cases of hypertensive conditions.

Table 2: Overall themes from providers.

Figure 1: The patient experience: central to organizing postpartum cardiac care.



Conclusions

- Maternal healthcare providers view support for referrals, sensitivity to patient priorities, and clarification of clinical workflow as integral in coordination of postpartum cardiac care for birthing people
- Documentation of birthing persons' experiences with postpartum cardiac care will be a crucial next step in aligning perspectives important to both maternal care providers and birthing people

