

< 6 weeks postpartum

- Blood pressure assessment
- Non-steroidal anti-inflammatory avoidance (where possible)
- Adherence to antihypertensives
- Screen for features of postpartum depression and/or anxiety. The Edinburgh Postnatal Depression Scale (EPDS) can be used as an initial screening tool

3-6 months postpartum

- Blood pressure assessment with a 24-hour blood pressure monitor where possible
 - Consider further assessment for a secondary hypertension screen +/- specialist review if blood pressure remains $\geq 130/80$ mmHg (ABPM),
 - $\geq 140/90$ mmHg (clinic blood pressure assessment) or if remains on antihypertensives
 - Encourage lifestyle measures if BP is noted to be persistently $> 120/80$ mmHg
- Assess for normalisation of abnormal laboratory-based results
 - Consider further assessment +/- specialist review for persistently abnormal renal function, urine microalbumin to creatinine ratio (uACR), urine protein to creatinine ratio (uPCR), liver function or haematological parameters.
- Screen for features of post-partum depression and/or anxiety
 - Consider a combination of non-pharmacological and pharmacological intervention
- Metabolic screen: BMI, fasting cholesterol and fasting blood glucose level assessment
 - Consider a combination non-pharmacological and pharmacological interventions in addressing abnormal metabolic features
 - Discuss future pregnancies: importance of pre-conception care and early preeclampsia prophylactic intervention (i.e: aspirin, regular exercise, dietary +/- supplemental calcium)
- Discuss contraception where relevant (where there is need for medical optimisation) prior to next pregnancy
- Explain future cardiovascular, metabolic and renal risk factors.

Yearly review

- Reassessment of metabolic, cardiovascular and renal risk factors (BP, weight, lipid and glycaemic profile, urine protein analysis)
 - Discuss future pregnancies: importance of pre-conception care and early preeclampsia prophylactic intervention (i.e. aspirin, regular exercise, dietary +/- supplemental calcium)
- Explain future cardiovascular, metabolic and renal risk factors