Ref. No: Date: Subject: FOI0065 22/07/2023

**NVPHG** Evaluation

## **REQUEST and RESPONSE**

## <u>This request is for St Helens and Knowsley Teaching Hospitals NHS Trust</u>

**Hospital name:** Whiston Hospital

Trust: St Helens and Knowsley Teaching Hospitals NHS Trust

Maternal medicine network (if known): C and M

<b>Details of Hyperemesis Service</b>		Response				
1	Are your patients routinely offered screening for NVP / HG at their booking visit?	Yes				
2	Do you offer community care for women with NVP / HG? (e.g. in a community day centre or at home)	Not usually but can be arranged occasionally.				
3	Do you offer ambulatory	Yes				
	management for women with NVP / HG?	If yes, where: Gynaecology ward				
4	If admitted to hospital in which locations are NVP / HG managed?	<ul><li>Gynaecology ward (&lt;13 weeks)</li><li>Obstetric ward (&gt;13 weeks)</li></ul>				
5	Which of the following criteria do you use for admission for inpatient	Continued nausea and vomiting, inability to keep down oral antiemetics	х			
	management? Select all that apply.	Continued nausea and vomiting associated with weight loss despite oral antiemetics	Х			
		Ketonuria	Χ			
		Confirmed/suspected comorbidity (e.g. urinary tract infection)	Х			
		Other	Χ			
		If 'Other' please specify: PUQE sco	ore			

## Assessment and management Which drugs / therapies are routinely recommended by your service? Please check the appropriate box.

Thei		As 1 <sup>st</sup> line medica tion	As 2 <sup>nd</sup> line medica tion	As 3 <sup>rd</sup> line medicat ion	Only after 1 <sup>st</sup> trimest er	For a maxim um of 5 days	As require d (PRN)	
Ginger							Х	
Acustimulati ons							Х	
Нур	nosis						X	
Ond	ansetron				X			
Cycl	lizine	Х						
Dom	peridone		Х					
Prochlorpera zine		Х						
Promethazin e							X	
Chlorpromazi ne							Х	
Metocloprami de			Х			Х		
Thiamine		X						
Pyridoxine		X						
Corticosteroi ds				Х				
Diazepam							X	
Proton pump inhibitor							Х	
7	Do you require patients to sign a risk form when prescribed			ın <sub>No</sub>	No			
		any of the above?			If Yes, please specify: N/A			
8	Which IV rehydration do you			0.9%	0.9% Normal saline X			
	routinely offer? Please select all:			Hartmann's solution X				
					Dextrose			
9	Do you offer enteral or parenteral nutrition for patients resistant to treatment?			ts Yes	Yes			
10	Are patients routinely offered a mental health screen?							

Pre	Pre-pregnancy counselling Respon					
11	1 Does your unit offer pre-pregnancy counselling for women with a history of severe NVP / HG?					
12 Do you have any further comments regarding management HG patients in your Trust?						
	We also prescribe Doxylamine with pyridoxine for NVP.					