

**Midwife's failure to identify and respond to
developing pre-eclampsia
(14HDC00452, 18 March 2016)**

*Community-based midwife ~ Blood pressure ~ Pre-eclampsia ~ Labour ~
Communication ~ Right 4(1)*

A woman, aged 26 years, was pregnant with her first child. The pregnancy progressed normally until 39+6 weeks' gestation, when the woman presented for a routine antenatal check with her LMC midwife. During this appointment, the woman was noted to have a high blood pressure. She was also noted to have been experiencing visual disturbances two weeks previously and again on one occasion in the days preceding the appointment. The woman was advised of the signs and symptoms of pre-eclampsia and she was told to contact the midwife if she experienced these symptoms or noticed a decrease in fetal movements. The midwife did not recommend to the woman that she consult with a specialist, or take additional steps to assess the woman's pre-eclampsia, such as arranging for blood tests and further urinalysis.

The following morning, the woman sent a text message to the midwife stating that she had experienced headaches and further visual disturbances that morning. At around midday, the midwife telephoned the woman and left a message, asking the woman to let her know if she experienced any more "symptoms". She did not arrange to assess the woman urgently in response to the symptoms she had reported.

That evening, the woman started experiencing contractions. She subsequently met the midwife at hospital.

On arrival at the delivery suite the midwife carried out an assessment and noted that the woman's blood pressure was very high. She did not carry out any further assessment in response to the raised blood pressure at that time, such as blood or urine testing. All other observations of the woman and baby were normal. The midwife then left the room.

When the midwife returned to the room, the woman reported feeling faint. The woman's blood pressure had risen further, and was very high. The on-call obstetric registrar was called. The registrar then took over the woman's care. The woman was managed for pre-eclampsia, and gave birth to her baby early the following morning. The woman continued to be managed for the symptoms of pre-eclampsia in the postnatal period.

It was held that the midwife failed to identify and respond appropriately to the developing pre-eclampsia. Accordingly, she failed to provide services to the woman with reasonable care and skill and breached Right 4(1).

Criticism was also made about the midwife's failure to advise the woman appropriately about the use of text message communication in relation to urgent matters, her lack of communication with the woman regarding her condition during labour, and her comments to the woman regarding another professional.

The midwife was referred to the Director of Proceedings. The Director filed a charge before the Health Practitioners Disciplinary Tribunal. Professional Misconduct was made out and a number of conditions were placed on the midwife's practice (should the Midwifery Council lift her suspension) including supervision for no less than 18 months.