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Welcome to the Inaugural Edition of the Cardio-Obstetrics Newsletter

We are pleased to present the **first edition** of the *Cardio-Obstetrics Newsletter*, a e-publication developed to support providers in the care of women through pregnancy and the postpartum period.

This newsletter was established in recognition of the growing incidence and complexity of cardiovascular disease among obstetric populations, and the critical importance of multidisciplinary collaboration among providers.

Each issue will feature clinical updates, educational resources, and institutional highlights relevant to cardio-obstetric care. Distributed **quarterly** in a digital format, this newsletter is intended to serve as an ongoing resource to foster communication, collaboration, and continued advancement in the management of cardiovascular disease in pregnancy and beyond.

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Featured Article

There is a Fourth Trimester of Pregnancy- and It Matters

In this edition, we are focusing on the fourth trimester of pregnancy. While most healthcare providers are familiar with the three traditional trimesters, it's important to recognize the fourth trimester. [The National Institute of Health](#) defines the fourth trimester of pregnancy as the first 12 weeks and beyond after delivery. This period is crucial for identifying and addressing heart disease, making it essential for women to have access to specialized clinics for care.

After being discharged from their obstetrician, many young, healthy women may not have established a primary care provider. The fourth trimester offers an excellent opportunity for cardiologists and Advanced Practice Providers to detect hypertension, assess risks, and establish long-term goals aimed at reducing the likelihood of cardiovascular disease later in life.

According to the **The American Heart Association**, women who experience any hypertensive disorders during pregnancy—such as chronic hypertension, gestational hypertension, and pre-eclampsia—are at a higher risk for heart disease compared to their peers. Access to care, education, and early intervention are vital in preventing heart disease among women.

Northside Hospital proudly leads the way with one of North America's first Maternal Heart Health Clinics, designed to educate, identify, treat, and mitigate risk factors for heart disease, particularly during the fourth trimester. If you have patients who could benefit

from this program, they can easily scan the QR code or click [here](#) to access the Cardio-OB homepage or call **404-845-8200** to schedule an appointment.



Fast Facts

Fourth Trimester of Pregnancy: Did You Know?

Maternal mortality is declining throughout the world, however, it is continuing to increase in the United States. Georgia has historically experienced unacceptably high rates of maternal mortality and morbidity compared to other states.



Facts specific to Georgia:

In **Georgia**, the maternal mortality rate is 66.3 per 100,000 live births, the second highest rate in the US.

Women in rural areas (defined as a population <50,000 people) face maternal mortality risks up to 50% higher than their urban counterparts; of Georgia's 159 counties, 120 are classified as rural.

Maternal mortality rates for black women are double that of their rural white counterparts and 30% higher than that among black women in urban areas.

Top **causes of death** during the fourth trimester of pregnancy include cardiomyopathy, hemorrhage, cardiovascular or coronary disease.

Patient Story: E'Laina and Esther - Preeclampsia's lasting impact

E'Laina's Story

Cumming resident E'Laina Craven was diagnosed with preeclampsia in her third trimester in March 2024.

"My pregnancy was mostly uncomplicated until I had to be rushed to the hospital several times for high blood pressure," she said. "I was 35, had a certain BMI, race and a high-stress job — all of which contributed to my diagnosis."

After giving birth, E'Laina spent a week in the high-risk maternity unit, receiving aggressive blood pressure management and IV magnesium to prevent seizures — a dangerous complication known as eclampsia.

Esther's story

For Atlanta resident Esther Udoji, the warning signs appeared after delivery. She had given birth to her third child at age 40, with no issues during pregnancy. But just days after going home in July 2024, she tested her blood pressure and found it was "astronomically high."



[Read full article here](#)

Announcements

Enhancing Care: CVD Risk Screening in Women's Services

The American College of Obstetricians and Gynecologists (ACOG) released its *Practice Bulletin: Pregnancy and Heart Disease* in 2019, providing guidance on the screening, diagnosis, and management of cardiovascular disease (CVD) in women from pre-pregnancy through the postpartum period. The bulletin recommends the use of the California CVD Toolkit Algorithm for screening. Northside's Women's Services has adopted this toolkit and implemented systemwide CVD risk screening across all Women's Services departments.

Why:

The United States continues to report the highest maternal mortality rates among developed nations with CVD accounting for a significant proportion of maternal deaths. The diagnosis of CVD during pregnancy remains challenging as normal pregnancy symptoms can overlap symptoms of CVD. Delays in recognition, diagnosis and management of CVD represent missed opportunities for timely intervention and optimization of maternal outcomes. Standardizing a universal CVD risk assessment for all pregnant and postpartum women across all clinical settings provides a critical strategy to reduce maternal morbidity and mortality. [Universal Cardiovascular Disease Risk Assessment in Pregnancy: Call to Action JACC: Advances Expert Panel - ScienceDirect](#)

Who:

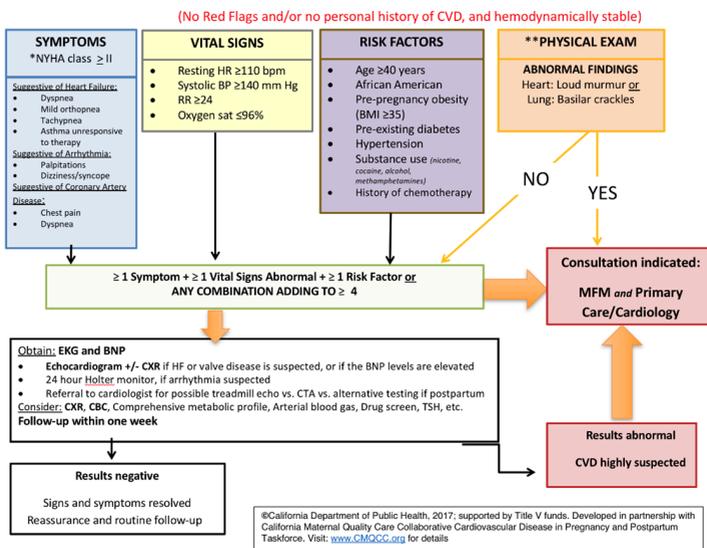
The Toolkit was developed by the [Cardiovascular Disease in Pregnancy and Postpartum Task Force](#). This initiative aims to provide a clinical resource for healthcare providers caring for pregnant and postpartum patients, including obstetricians, primary care and emergency medicine physicians. The toolkit outlines key assessment and management approaches for CVD based on individual risk factors and presenting symptoms. [Cardiovascular Disease | California Maternal Quality Care Collaborative](#)

Screening Goal:

The CVD risk screening algorithm is aimed at identifying and addressing cardiovascular symptoms and conditions from pre-pregnancy through the postpartum period to help reduce maternal deaths. [ACOG Releases Comprehensive Guidance on How to Treat the Leading Cause of U.S. Maternal Deaths: Heart Disease in Pregnancy | ACOG](#)

CVD Screening: Looking Ahead

The long-term goal of this screening is to ensure that once patients are identified, they receive ongoing care that extends well into the postpartum period. This approach includes a follow-up visit around three months postpartum, allowing providers and patients to discuss continued management, annual follow-up, and future pregnancy planning. [ACOG Releases Comprehensive Guidance on How to Treat the Leading Cause of U.S. Maternal Deaths: Heart Disease in Pregnancy | ACOG](#)



Maternal Levels of Care



Northside was the first hospital in the nation to receive Maternal Levels of Care Level IV designation in late 2022, and we are proud to have once again been recognized as a **Level IV Maternal Center** by the **Joint Commission**, in collaboration with the **Georgia Department of Public Health**.

According to **ACOG**, a **Level IV Maternal Center** includes all the capabilities of a Level III facility, with the addition of **on-site medical and surgical care for**

the most complex maternal conditions and critically ill pregnant women and fetuses across the **antepartum, intrapartum, and postpartum** continuum of care.

Levels of Maternal Care | ACOG

This designation demonstrates that Northside has the capability to care for the most complex obstetric patients, supported by our comprehensive Cardio-Obstetrics Program.

Provider Resources and Patient Education



Want to sharpen your cardio-ob skills or discuss an interesting case? Join us for our quarterly Cardio-Obstetrics Case Presentations for CME credit. The next session will be held on **January 8, 2026, from 7:00–8:00 AM**. Watch for the CME flyer and registration information soon.

Prefer to learn at your own pace? Check out [Society of Maternal Fetal Medicine's](#) free courses.



Additional CMEs and Resources links:

Provider Education

[Role of Cardiovascular Health in Maternal Health - Professional Heart Daily](#) | [American Heart Association](#)

Patient Education

[Pregnancy and Maternal Health | Go Red for Women](#)

Provider References

[GaPQC Cardio-OB Reference Guide Brochure](#)

[GaPQC Cardiac Warning - Watch Flyer](#)

Locations

Cardio Obstetrics Program: The Cardio-Obstetrics Program provides specialized care for women with existing heart disease, cardiovascular risk factors, or pregnancy related complications such as HELLP syndrome and cardiomyopathy. This is a multidisciplinary program that brings together cardiology, obstetrics and maternal fetal medicine to ensure safe management before, during and after pregnancy

Northside Heart - Atlanta, Canton, Cumming, Roswell
Northside Hospital Cardiovascular Care (NHCC) - Atlanta
Northside Cardiovascular (NCV) - Buford, Lawrenceville

Maternal Heart Health Clinic: The Maternal Heart Health Clinic cares for postpartum women with a history of pre-eclampsia, hypertensive disorders of pregnancy, or those at risk of developing cardiovascular disease. The clinic is nurse practitioner-led and focuses on blood pressure management, patient education, mental health screening, and ongoing follow-up as needed. An inpatient screening tool helps identify appropriate patients and generates automatic referrals, though referrals are not limited to this process.

Northside Heart - Canton

Northside Cardiovascular (NCV) - Lawrenceville

Northside Heart - Cumming

Northside Hospital Cardiovascular Care (NHCC) - Atlanta

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