

General Overview

Meeting #1 - 12/1/25

Mentor: Dr. Anthony Monteiro

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- Works in labor + delivery @ RWJ
- Thinks our PPH idea is better than EPIC's!!

Project based on hypertension for pregnant women → create a phone (and maybe a web) app

- Who is at risk?(Elevated blood pressure is the initial risk factor, can still weed people out)
 - Identify at-risk patients
- How will information be communicated in a timely manner?(usually goes through 3 or 4 priority residents that are on call, the final one is the attending doctor)
 - Communicate to right staff members quickly for treatment

Ad-hoc notes:

- Different residents are assigned for different situations
- Not every hospital is academic(some nurses aren't used to having residents/med and don't know the communication protocol)
- EMR = "electronic medical record"
- EPIC doesn't like others changing their system
 - Integrating may be difficult, so separate web app is ideal
- Women's Health Day started in NJ due to a post-partum patient who died because of hypertension
- Order of communication typically: nurse → residents[1, 2, 3...], supervising doctor

Hypertension:

- Cardiovascular issue
- Can lead to pre-eclampsia and other issues

What we need to look at:

- Current procedure/algorithm used
 - What's expected?
 - What's happening?
 - Seems to be nurse reaches out to residents
 - flaws/failures
- Understand hypertension medically and gain background knowledge
 - Seems to be a cycle involved: Blood pressure must be recorded twice within one hour, if delayed → must start over(inefficient)
- Variables to think about: location of resident/doctor to avoid notifying ones in surgery(...might be too difficult)
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To do:

- Hypertension research, clinical studies
- Dr. Monteiro will be getting back to us with algorithm-related and hypertension information that he will also help us understand in less-medical terms at a later meeting
- Next meeting date is unknown for now
- We will likely also meet Dr. Monteiro at RWJ eventually so we can see what happens in-person