

HELP (HyperEmissis Level Prediction) SCORE

Name: _____ Date: _____ Gestational Age: _____ SCORE: _____

TODAY'S Weight: _____ LAST WEEK'S Weight: _____ % change: _____ PREVIOUS SCORE: _____

Meds: Ondansetron Granisetron Diclegis Promethazine Metoclopramide _____

Mark ONE box in EACH ROW that most accurately describes your experience over the last: _____ days(s).

My nausea level most of the time:	0	1 (Mild)	2	3 (Moderate)	4	5 (Severe)
I average __ vomiting episodes/day:	0	1-2	3-5	6-8	9-12	13 or more
I retch/dry heave __ episodes daily:	0	1-2	3-5	6-8	9-12	13 or more
I am urinating/voiding:	Same	More often, IV fluids; light or dark color	Slightly less often, and normal color	Once every 8 hours; slightly dark yellow	Less than every 8 hours or darker	Rarely; dark, blood; foul smell
Nausea/vomiting severity 1 hour after meds OR after food/drink if no meds:	0 or No Meds	1 (Mild)	2	3 (Moderate)	4	5 (Severe)
Average number of hours I'm <u>unable</u> to work adequately at my job and/or at home due to being sick has been:	0	1-2 (hours are slightly less)	3-4 (can work part time)	5-7 (can only do a little work)	8-10 (can't care for family)	11+ (can't care for myself)
I have been coping with the nausea, vomiting and retching:	Normal	Tired but mood is ok	Slightly less than normal	It's tolerable but difficult	Struggling: moody, emotional	Poorly: irritable depressed
I have been able to eat/drink AND keep it down: <i>Medium water bottle/large cup = 2 cups/500mL.</i>	Same; no weight loss	Total of about 3 meals & 6+ cups fluid	Total of about 2 meals & some fluid	1 meal & few cups fluid; only fluid or only food	Very little, <1 meal & minimal fluids; daily IV	Nothing goes or stays down, or daily IV/TPN
My anti-nausea/vomiting meds stay down/are tolerated:	No meds	Always	Nearly always	Sometimes	Rarely	Never/IV/SQ (subQ pump)
My symptoms compared to last week:	Great	Better	About Same	Worse	Much Worse	Much Worse!!!
Weight loss over last 7 days: ___%	0%	1%	2%	3%	4%	5%
Number of Rx's for nausea/vomiting	0	1	2	3	4	5+
	0 pts	1 pt/answer	2 pts/answer	3 pts/answer	4 pts/answer	5 pts/answer
TOTAL each column = (#answers in column) x (# points for each answer)	0	_____	_____	_____	_____	_____
TOTAL for ALL columns: _____	None/Mild ≤ 19		Moderate 20-32		Severe 33-60	

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Weight Loss % = (Amount lost ÷ Pre-pregnancy weight) x 100



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The Global Voice of HG

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