STANDING ORDER

HYPERTENSION

BP parameters and high blood pressure definitions:

(*Source:* 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults)

BP Category	SBP		DBP
Normal	<120 mm Hg	And	<80 mm Hg
Elevated	120-129 mm Hg	And	<80 mm Hg
Hypertension			
Stage 1	130-139 mm Hg	Or	80-90 mm Hg
Stage 2	≥140 mm Hg	Or	≥ 90 mm Hg
Hypertension Urgency	≥180 mm Hg	Or	≥120 mm Hg
Inmates with known history of hypertension who			
are not currently taking medications and are			
currently stable and asymptomatic with the			
elevated BP.			
Hypertension Emergency	≥180 mm Hg	Or	≥120 mm Hg
Evidence of new or worsening target organ			
damage usually seen in inmates who were			
previously normotensive.			
Examples of target organ damage include:			
hypertensive encephalopathy, ICH, acute			
ischemic stroke, acute MI, acute LV failure with			
pulmonary edema, unstable angina pectoris,			
dissecting aortic aneurysm, acute renal failure,			
and eclampsia.			

- I. **ASSESSMENT for BP measured at Stage 2 or higher** (please obtain a manual BP in both arms and document findings)
 - a. Does the inmate have known history of hypertension? History of taking medications for high blood pressure? What medications? Last taken?
 - b. Do they currently have symptoms concerning for a hypertensive emergency? Vision changes, chest pain, SOB, severe fatigue, nausea/vomiting (in females this is common symptoms of acute MI), confusion, symptoms concerning for stroke, severe headache, severe edema, no urine output in the past 12 hours.
 - c. Is the inmate pregnant? How many weeks?
 - d. Other known chronic illnesses diabetes, heart failure, COPD, substance abuse, anxiety, and etc.

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II. MANAGEMENT

a. Hypertension EMERGENCY

 \geq 180/120 mm Hg AND current symptoms (see point b above and table above) or currently pregnant

i. Send immediately to ED for immediate evaluation and management

b. Hypertension URGENCY

 \geq 180/120 mm Hg and NO current symptoms or currently pregnant (see point b above and table above)

- i. Inmate is able to be booked in
- ii. Notify Facility Provider within 12 hours of being booked in and obtain orders, goal is to get inmate back on medications as soon as possible and may need therapy intensified.
- iii. Get ROI for outside records from previous Facility Provider who was prescribed anti-hypertensive medications
- iv. Recheck BP 2 days after starting oral medications as ordered by Facility Provider. Give BP to Facility Provider to review.

c. Stage 2 Hypertension (see table above)

- i. Get ROI for outside records from previous Facility Provider who prescribed antihypertensive medications
- ii. Recheck BP in 2 days and give chart to Facility Provider to review and order necessary medications