

Hypertension Case Study MSN

C.S. is a 40-year-old male who attends a community health screening. He states that he has not seen a health care provider in a “really long time.” He is a truck driver who eats mainly fast food while on the road. He smokes a pack of cigarettes a day “just for something to do during the long hours of driving and to keep me calm.” C.S. is 5 ft., 9 in tall and weighs 230 lb. His BP is 182/104, heart rate 90, respirations 24, and temperature 97.0°F.

1. What risks factors for hypertension does C.S. have?

He is male, has not had consistent health care so might not watch his health closely, poor diet high in fat and sodium, a pack per day smoker, sedentary life style being a truck driver, obesity, smokes to “keep himself calm” so possible high stress levels.

2. What clinical manifestations of hypertension would you assess for in C.S.?

I would assess for fatigue, dizziness, palpitations, angina, and dyspnea these would indicate severe HTN. I would also reassess his vitals after a little while of him being there to make sure we got accurate readings and no false highs. Then I would assess and ask if he was having any other symptoms due to his lack of health care, he could have an underlying cause to the high BP indicating secondary HTN rather than just primary.

3. What complications will you assess C.S. for?

I would assess for signs and symptoms CAD, left ventricular hypertrophy, HF, cerebrovascular disease, PVD, nephrosclerosis, and retinal damage.

C.S. is referred to his health care provider to follow up on his high blood pressure screening.

4. What diagnostic studies might you expect the health care provider to order for C.S.?

I would expect the HCP to order basic lab studies to assess for secondary HTN as well as complications that could have been caused by HTN. So, labs like BUN and serum creatinine, creatinine clearance, serum electrolytes and glucose, serum lipid profile, uric acid levels and a UA. I would also expect BP monitoring (possible ABPM), ECG, and echocardiogram.

C.S.’s BP is monitored for several visits and remains elevated. His serum cholesterol, BUN, and creatinine levels are elevated. His creatinine clearance (glomerular filtration rate) is below normal, demonstrating renal insufficiency.

5. What type of lifestyle modifications would you recommend for C.S. to control his BP?

I would recommend that he stop smoking or if nothing else try to cut back on how much and often he smokes. Also, changing his diet to lower fat and lower sodium foods diets such as DASH or Mediterranean. He needs to increase his activity level so maybe talking a 30 min walk around the truck stop during breaks or when he shuts down for the night. He could also do some resistance exercises with bands he can keep in his truck that won’t take up much room. Stress plays a part in HTN as well so I would give him some resources for different coping strategies and relaxation

methods rather than smoking. Lastly I would educate him on the effects the HTN is having on his renal system so it is very important that he make these life style changes and start seeing his HCP on a regular basis for monitoring and treatment.