

Unit 3- Hypertension

L- Chapter 36

ONLINE CONTENT (1H)

Unit Objectives:

- Describe the collaborative care of primary hypertension, including drug therapy and lifestyle modifications. (1,2)*
- Use the nursing process as a framework for providing individualized care to patients with hypertension. (1,2,5,7)*
- Describe the collaborative care of a patient with hypertensive crisis. (1,2)*
(*Course Objectives)

Use your three handouts: Highlights from the 2017 Guideline for the Prevention, Detection, evaluation, Management of High Blood Pressure in Adults; and How Can I Reduce High Blood Pressure?, and Guidelines Made Simple, to answer the following questions. Place your answers in the Unit 3 Chapter 36 Dropbox by 0800 on 2/8/2024.

1) What are the parameters for the categories of blood pressure?

Normal: **SBP less than 120 mmHg and DBP less than 80 mmHg**

Elevated: **SBP 120-129 mmHg and DBP less than 80 mmHg**

Stage 1: **SBP 130-139 mmHg and DBP 80-89 mmHg**

Stage 2: **SBP greater than or equal to 140 mmHg and DBP greater than or equal to 90 mmHg**

2) Name ten things to do or avoid to obtain an accurate blood pressure measurement.

To get a precise blood pressure reading, sit comfortably in a chair with your feet flat on the ground and your back supported, while keeping your arm at the same level as your heart. Use a properly sized cuff, and make sure you are relaxed—refrain from talking or moving during the measurement. Take several readings, spaced at least two minutes apart, and calculate the average for better accuracy. It's recommended to check your blood pressure at the same time each day, preferably before meals and after using the restroom. Steer clear of caffeine, smoking, and exercise for at least 30 minutes before taking your measurement. Finally, ensure your bladder is empty and refrain from measuring right after eating, as these elements can impact the reading.

3) What is the main difference between hypertensive urgency and a hypertensive emergency?

Hypertensive urgencies refer to markedly high blood pressure levels in patients who are otherwise stable, without any signs of immediate or pending organ damage. In contrast, hypertensive emergencies are marked by drastically increased blood pressure levels along with indications of new or deteriorating organ damage.

4) What steps should we encourage patients to take when measuring their blood pressure at home?

To make precise comparisons, utilize the same approved device at the same times for measuring your blood pressure at home. Position the cuff accurately, ensuring the lower edge is just above the crease of your elbow. For dependable results, take at least two readings, separated by one minute, each morning prior to taking any medications and each evening before your meal. It is advisable to measure weekly during the two weeks following any treatment changes and in the week leading up to your clinic appointment. Carefully document all readings, use a monitor equipped with built-in memory, and take it to all your clinic visits for assessment.

5) What should we recommend regarding physical activity for patients with hypertension?

We should recommend that the patient tries to get 90-150 minutes of aerobic and dynamic resistance exercises per week. Or 3 sessions per week of isometric resistant exercises.

6) What are seven steps patients can take to reduce high blood pressure?

To reduce high blood pressure, patients should adopt a healthy diet, such as the DASH diet, limit sodium intake, and exercise regularly for at least 30 minutes a day. Maintaining a healthy weight, limiting alcohol consumption, quitting smoking, and managing stress through techniques like meditation or deep breathing are also crucial. These lifestyle changes can work together to significantly lower blood pressure and improve overall heart health.