

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 located under the Week 5 Lessons tab to answer the following questions. Place your answers in the Unit 3 Chapter 36 Dropbox by 0800 on 2/5/2026.

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

	SBP	DBP
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Normal:	<120 mm Hg	< 80 mm Hg
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Elevated	120-129 mm Hg	<80 mm Hg
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Stage 1	130-139 mm Hg	/ 80-89 mm Hg
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Stage 2	≥ 140 mm Hg	/ ≥ 90 mm Hg
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- 2) Name ten things to do or avoid to obtain an accurate blood pressure measurement.

You should use the correct cuff size on a bare arm, support patients arm at heart level, take blood pressure in a temperature regulated room, use a blood pressure device that has been validated for accuracy, patient should have an empty bladder, and have the patient relax with feet on the floor and legs uncrossed for more than 5 minutes. You should also instruct the patient to avoid any stimulating activity such as drinking caffeine, exercise, or smoking at least 30 minutes before the measurement. Also instruct the patient to not talk during the rest period of the measuring period, as well as the clinician. It is important that the patient refrains from using their phone during this time as well. When finalizing the reading, make sure you are taking the average of two readings at least 1 minute apart, and providing this information to the patient in writing and verbally.

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

The main difference between hypertensive urgency and a hypertensive emergency is that with hypertensive emergency there is acute organ damage occurring, and this needs to be treated immediately. You may have extreme high blood pressure with hypertensive urgency; however, no acute organ damage is occurring.

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

We should first encourage our clients to get a home machine that has been validated for accuracy in the home setting. We should instruct them to get a cuff that is the proper size, also including teaching regarding how to find their size. We should encourage them to reduce caffeine, smoking, and exercise 30 minutes before measuring. Keep yourself relaxed, arm at heart level, legs uncrossed and back supported in a chair for at least 5 minutes prior. We should instruct them to take 4 readings in total, 2 sets of 2 1 minute apart. First set should be in the morning after emptying your bladder and before taking medication, and the second should be at bedtime. This should be done each day 3-7 days before meeting with your physician. It is important to document this daily in writing and share these with your physician.

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

We should recommend our clients get at least 90-150 minutes of aerobic activity or dynamic resistance exercises per week. It can start gradually, such as starting with brisk walks, riding bikes, or swimming. Having a plan and structure is important, as this increases compliance. Your physician can help set up a tailored plan for you.

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

Patients can lower their blood pressure by including exercise, having blood pressure medication adherence, losing weight if obese, limit alcohol to no more than one drink per day if you're a woman, and two drinks per day if you are a man, avoid smoking or exposure to second hand smoke, eat a heart healthy diet, monitor you blood pressure often, and reducing sodium are all steps patients can take to reduce high blood pressure.