

Subjective

- Headache
- Facial flushing
- Dizziness
- Fainting
- Visual disturbances
- Nocturia

Reference:
Holman, H.C., Williams, D., Johnson, J., Ball, B.S., Wheless, L.K., Leehy, P., & Lemon, T. (2019). RN Adult Medical Surgical Nursing (11th Edition, p.234). Leawood, KS: Assessment Technologies Institute.

Nursing Diagnosis/Outcomes

1. Risk for Decreased Cardiac Output related to ventricular hypertrophy as evidenced by history of elevated blood pressure measurements. (Gulanick & Myers, 2016, location 39032)
 - a. Outcome: Client will maintain blood pressure within recommended range.
2. Deficient Knowledge related to insufficient information regarding management of hypertension as evidenced by verbal report of insufficient knowledge. (Gulanick & Myers, 2016, location 15492)
 - a. Outcome: Client will identify effective strategies for reducing blood pressure.
3. Acute Pain related to increased cerebral vascular pressure as evidenced by verbal report of headaches in the morning. (Gulanick & Myers, 2016)
 - a. Outcome: Client will adhere to prescribed treatment regimen to prevent and reduce symptoms of hypertension.

Reference:
Gulanick & Myers, 2016, location 39032, 15492, 15492

Nursing Interventions

- 1a. Instruct the patient to self-measure blood pressure using home-monitoring equipment.
 - Rationale: Blood pressure self measurement may be useful in documenting response to medication regimen and encouraging compliance with treatment. (Gulanick & Myers, 2016, location 15552)
- 1b. Provide information on smoking cessation.
 - Rationale: Smoking is a modifiable risk factor for hypertension. (Gulanick & Myers, 2016, location 15576)
- 2a. Assess the patient's knowledge of hypertension and management of hypertension.
 - Rationale: Assessment provides a starting point in determining education needs regarding hypertension and management. (Gulanick & Myers, 2016, location 15505)
- 2b. Offer teaching on the rationales and strategies of a low-sodium diet.
 - Rationale: Excess dietary sodium contributes to elevated blood pressure via fluid retention. (Gulanick & Myers, 2016, location 15558)
- 3a. Instruct patient regarding importance of prompt reordering of medication.
 - Rationale: Missing doses of antihypertensive medications while awaiting refills may contribute to rebound hypertension and exacerbate symptoms. (Gulanick & Myers, 2016, location 15634)
- 3b. Assess for risk factors that may negatively affect adherence to treatment regimen
 - Rationale: Knowledge of causative factors provides direction for subsequent interventions. (Gulanick & Myers, 2016, location 15617)

Reference:

Objective

- Systolic BP of 140 mmHg or higher **or** diastolic BP of 90 mmHg or higher averaged over two or more measurements taken 1 to 4 weeks apart.
- Elevated BUN
- Elevated creatinine
- Retinal changes
- Reference:
Holman, H.C., Williams, D., Johnson, J., Ball, B.S., Wheless, L.K., Leehy, P., & Lemon, T. (2019). RN Adult Medical Surgical Nursing (11th

History of Present Illness

N/A