Hypertension Assessment

Hypertension is when a patient has persistent high blood pressure. This is diagnosed when a patient's systolic blood pressure is greater than 130 mm Hg and/or the diastolic blood pressure is greater than 80 mm Hg according to the 2017 American College of Cardiology (ACC) and American Heart Association (AHA) guidelines (*these guidelines are still up for debate and some experts are still utilizing the older recommendations of 140 mm Hg systolic and 90 mm Hg diastolic as cutoffs). Remember to educate patients that high blood pressure is called hypertension and health care providers will use the terms interchangeably.



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Mechanism

Essential Hypertension
Espresso Hiker-BP
Essential hypertension is also known as primary hypertension. The cause is idiopathic, but it is thought to be linked to genetics, poor diet, and obesity.

Secondary Hypertension
(2) Tutu Hiker-BP
Secondary hypertension is caused by either a disease or medication. Conditions or disease that affect the kidneys, arteries, lungs, etc. can cause hypertension. Treatment involves treating both the underlying cause and the hypertension.

Assessment

Headache
Head-egg-lump
Some patients are asymptomatic when hypertension occurs. However, when blood pressure becomes extremely elevated, the increase in arterial pressure can cause a patient to have a constant headache.

Vision Changes
Delta Eyes
Increase in blood pressure can cause an increase in pressure on the blood vessels in the eyes. This causes the vessels to become strained or swell resulting in vision changes or eye pain.

Nosebleed (Epistaxis)
Nose-bleeding
Chronic nosebleeds can be the result of hypertension. Vessels in the nose can burst from the increase pressure causing the nosebleed.

Chest Pain
Chest Pain-bolt
The increase in oxygen demand by the heart to beat harder can cause chest pain, if the oxygen demands cannot be met.

Syncope (Fainting)
Sink-of-peas Fainting
Some patients that have hypertension will have a form of orthostatic blood pressure. This can cause a patient to faint or become dizzy upon standing.

Diagnosis

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Average 2 Sets, 2 Minutes Apart

2 Sets of BP-cuffs with (2) Tutu Clock between

American Heart Association recommends that when hypertension is in question; take a set of blood pressures two minutes apart. Average the two blood pressures to determine what stage the patient could be in.

After 2 or More Visits (within 1-4 weeks)

Second Visit sign-in

To properly diagnose hypertension, a patient needs to have elevated blood pressure readings on two or more subsequent office visits in a 1-4 week timeframe. Further, if the patient has a BP of >180/110 and CV risk factors, a diagnosis of HTN can be made off a single visit.

Nursing Considerations

Take BP Both Arms

BP-cuffs on Both Arms

Take the blood pressure on different arms to confirm an accurate reading. In some health conditions, such as: coarctation, thrombus, etc., blood pressure readings may be different and the provider should be notified.

Common in African Americans

African American

The African American population is at the highest risk of developing hypertension. However, it is important to educate every patient on the risk factors for hypertension and what lifestyle changes need to take place to manage the risk factors.

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