

Lakeland Care
PROTOCOL ORDERS
Hypertension Care Protocols

Diagnosis/Chief Complaint	
Patients ages 18 years and older, not pregnant with diagnosis of hypertension classification based on 2 or more seated BP readings on 2 or more office visits.	
Lab Evaluations/Results	
To be determined by provider	
Diagnostic Evaluation/Results	
Blood pressure checked at each visit using appropriate sized cuff while pt. in an upright sitting position and arm at patient's heart level. BP cuff should be placed on bare arm 1 – 2 in. above the antecubital space. If greater than 140/90, measure BP after seated 5 – 10 minutes, feet flat, arm at rest.	
Plan of Care	
<ol style="list-style-type: none"> 1. Validate home monitoring blood pressure equipment on an annual basis. 2. Assess for BMI, smoking and alcohol intake. 	
Additional Care	
Approval/Signatures	
Physician Section Leader:	Date:
Medical Director:	Date:

DISTRIBUTION

All recipients of this protocol must acknowledge their receipt and understanding of the protocol by referring any questions or problems with the protocol within ten days of the issue date to their immediate supervisor. If no questions or problems are communicated, it will be assumed that the protocol has been read and understood. All questions regarding this protocol its implementation may be referred to the Medical Director of **practice name**

Original Date: 3-25-15
Reviewed Dates: 4-28-16
Revised Dates: 2-22-18