

6

Hypertension

Patient name: _____

Admission: _____

NRS
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| <p>I. The client/caregiver can define hypertension.</p> <ul style="list-style-type: none"> A. It is the occasional or continued elevation of diastolic or systolic pressure. B. The systolic reading (the top number) represents the pressure exerted on the blood vessel wall when the heart is contracting. C. The diastolic reading (the bottom number) represents the pressure on the blood vessel while the heart is at rest. <p>II. The client/caregiver can state normal blood pressure values. (No absolute dividing line exists between normal and high blood pressure, but the American Heart Association and National Heart, Lung, and Blood Institute gives the following guidelines.)</p> <ul style="list-style-type: none"> A. Normal blood pressure readings should be 120/80 or below. B. If your systolic reading is 120 to 139 or diastolic is 80 to 89 (or both), then this is considered “prehypertension.” C. High blood pressure is a pressure of 140 systolic or higher and/or 90 diastolic or higher that stays elevated over time. <p>III. The client/caregiver can recognize signs and symptoms of high blood pressure, although it is frequently asymptomatic and is considered the “silent killer.”</p> <ul style="list-style-type: none"> A. Dizziness B. Headaches, often described as throbbing or pounding C. Palpitations D. Blurring of vision E. Fatigue F. Nosebleeds G. Insomnia H. Nervousness I. Chest pain (angina) J. Shortness of breath (dyspnea) | <p>IV. The client/caregiver can list factors that increase risk.</p> <ul style="list-style-type: none"> A. Age (persons older than 35 years) B. Black C. Close blood relative with hypertension D. Overweight E. Stress F. High sodium intake G. High cholesterol intake H. Oral contraceptives I. Cigarette smoking J. Excessive alcohol use K. History of diabetes, gout, or kidney disease L. Sedentary lifestyle <p>V. The client/caregiver can list measures to control hypertension.</p> <ul style="list-style-type: none"> A. Monitor blood pressure at home, and know what it should be. B. Take medication exactly as prescribed. C. Lifestyle changes to reduce stress. D. Eat balanced meals low in saturated fat, cholesterol, and sodium. E. Stop smoking (use tobacco-cessation teaching guide). F. Lose weight if overweight (use weight-reduction teaching guide). G. Avoid oral contraceptives. H. Avoid alcohol. I. Have regular medical checkups. J. Avoid over-the-counter medications unless recommended by physician. K. Exercise regularly. L. Use Medic Alert cards/bracelet. <p>VI. The client/caregiver is aware of possible complications.</p> <ul style="list-style-type: none"> A. Myocardial infarction B. Heart failure C. Stroke D. Kidney failure E. Malignant hypertension |
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(Continued)

RESOURCES

American Heart Association
www.americanheart.org

National Institutes of Health
www.nih.gov

American Dietetic Association
www.eatright.org

Cardiac Rehab Programs offered at many hospital centers

Support groups for weight control and smoking cessation

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