

## Best Practice Guideline

### I. Hypertension

#### II. Diagnosis and Screening

##### a. Screening Goals:

Patient Population	Population Specific Goal
Patients with diabetes, any age	SBP < 140mmHg, DBP < 90mmHG
Patients with chronic kidney disease, any age	SBP < 140mmHg, DBP < 90mmHG
Patients < 60 without diabetes or CKD	SBP < 140mmHg, DBP < 90mmHG
Patients ≥ 60 without diabetes or CKD	SBP < 150mmHg, DBP < 90mmHG

#### III. Surveillance / Follow-up Interval

Blood Pressure not at goal	Weekly nurse visits for BP check until blood pressure is at goal Follow-up physician visit 3 months after patient is first at goal
Blood pressure at goal	Physician visit every 6 months

#### IV. Treatment Indications

##### a. Options

Patient Population	Race/Age	Recommended Medication
Chronic kidney disease (CKD) with or without diabetes	Any race, any age	ACEI or ABI along or in combination with other drug classes
Diabetes without CKD	Black	Thiazide diuretic or calcium channel blocker alone or in combo
	Non-black	Thiazide diuretic or ACEI/ARB or calcium channel blocker alone or combo
Patients without diabetes or CKD	Black	Thiazide diuretic or calcium channel blocker alone or combo
	Non-black	Thiazide diuretic or ACEI/ARB or calcium channel blocker alone or combo

- b. Strategies
  - i. Maximize first medications before adding a second medication
  - ii. Add second medication before reaching maximum dose of first medication
  - iii. Start two medication classes at the same time

**References:**

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[2014 Evidence-Based Guideline for the Management of High Blood Pressure in Adults Report From the Panel Members Appointed to the Eighth Joint National Committee \(JNC 8\)](#)