

ASSESSMENT

If you are newly diagnosed or experiencing high blood pressure, your Primary Health Care Practitioner may assess the following (these may not pertain to every patient):

Physical Exam

- Weight, eye exam, thyroid
- Carotid and other artery blockages
- Heart and lungs
- Kidney size, abdominal aneurysm
- Leg swelling, neurologic (nervous system)

Identifiable Causes

- Sleep apnea
- Drug-induced
- Chronic kidney disease
- Adrenal gland disorder
- Thyroid or parathyroid disease

Presence of Body Organ Damage

- Heart enlargement, angina, heart failure
- Brain: stroke or TIAs (mini-strokes)
- Chronic kidney disease
- Circulation disorders
- Retina disorders

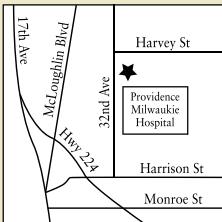
Laboratory and Other Tests

- Blood glucose (look for diabetes)
- Lipid panel (cholesterol)
- Serum potassium, creatinine, calcium
- Hematocrit (for anemia)
- Urinalysis
- Electrocardiogram

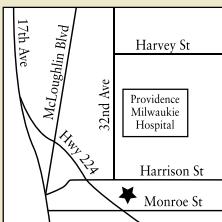
LOCATIONS

HYPERTENSION

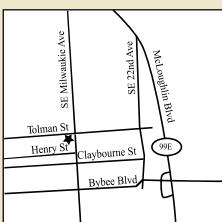
NORTHWEST PRIMARY CARE LOCATIONS



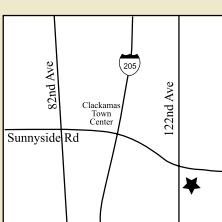
CLACKAMAS
INTERNAL MEDICINE
10024 SE 32nd Ave.
Milwaukie, OR 97222
(Patients 15 years and older)



MILWAUKIE
FAMILY PRACTICE
3033 SE Monroe St.
Milwaukie, OR 97222



SELLWOOD/
MORELAND CLINIC
6327 SE Milwaukie Ave.
Portland, OR 97202



TALBERT CENTER
FAMILY PRACTICE
12360 SE Sunnyside Rd.
Clackamas, OR 97015

For appointments and assistance, call
503.659.4988.
nwpc.com



HYPERTENSION

FACTS

Over 65 million Americans have high blood pressure/hypertension.

Hypertension increases the risk for:

- Heart disease (heart attacks, congestive heart failure, heart enlargement)
- Strokes
- Aneurysms (brain and abdomen)
- Kidney disease
- Peripheral arterial disease (hardening of the arteries)
- Retinopathy (bleeding in the eye, leaking of blood vessels)
- Erectile dysfunction

WHY YOU MAY ALREADY HAVE HIGH BLOOD PRESSURE/HYPERTENSION

- Aging
- Heredity
- Obesity
- Alcohol excess
- Salt sensitivity
- Stress

HIGH BLOOD PRESSURE/HYPERTENSION		
	Systolic (1st Number)	Diastolic (2nd Number)
Hypertension Stage 1	140-159	90-99
Hypertension Stage 2	160 or greater	100 or greater

TREATMENT

Blood Pressure Goals

- If your blood pressure is 140/90 or higher, aim for a goal in the 130s/80s or less.
- If your blood pressure is 130/80 or higher, and you have diabetes or chronic kidney disease, aim for a goal in the 120s/70s or less.

LIFESTYLE MODIFICATION

Diet Should Be Rich In:

- ✓ Fruits
- ✓ Vegetables
- ✓ Low-fat dairy products
- ✓ Low saturated and total fats

Dietary Salt Reduction

- ✓ 2000-3000 milligrams of sodium per day (carefully read labels)

Aerobic Physical Activity

- ✓ Exercise 30 minutes per day, 3-5 days of the week

Moderation of Alcohol Consumption

- ✓ Men: 2 or fewer drinks per day
- ✓ Women: 1 or fewer drinks per day

If lifestyle modification does not bring your blood pressure down to the desired goal, medications may be added.

MEDICATION

- Many types of blood pressure medication exist. Most patients can be treated successfully.
- Most patients require two or more medications to meet their blood pressure goal.
- High blood pressure will likely worsen with time. Expect to have medication adjustments.
- Remember to take your medications as they are prescribed.
- Side-effects may occur. Please be aware of what side-effects may occur with your medications.
- Keep a list of your medications with you at all times.

FOLLOW-UP AND MONITORING

- Consider buying a blood pressure monitor (arm cuff) for home use — it is worth the investment.
- See your Primary Health Care Practitioner regularly to monitor the effects of your medication.
- Monthly office visits until blood pressure reaches goal (more frequently if blood pressure is $>160/100$).
- Once stable, office visits needed at least every 3-6 months.
- Lab Tests: Potassium and Creatinine (Kidney test) once or twice a year.

