

Hypertension: Outpatient Care Protocol

Alarm features

Uncomplicated hypertension can be managed at outpatient clinic by providing symptomatic treatment. However, hypertension associated with alarm features should be immediately referred to hospital for prompt treatment. The alarm features are:

- Persistent systolic blood pressure recoding of more than 200 mmHg even after medication
- Hypertensive emergencies where severe elevation of blood pressure (SBP> 220 mm of Hg or DBP>130 mm of Hg) is seen
- Patients with severe retinopathy (hemorrhage and papilloedema) or malignant hypertension
- Raised serum creatinine or low plasma potassium in the absence of a diuretic
- Hematuria, proteinuria or cells in urine
- Sudden and severe headaches
- Symptoms of blurred vision or dizziness or nausea and vomiting
- Sudden blackouts
- Complaints of weakness of the limbs, slurred speech or tongue protruding to one side
- Confusion
- Loss of unconsciousness