Arkansas Department of Health Chronic Disease Prevention and Control Branch Blood Pressure Screening and Referral Guidelines Table 1 Classification of Blood Pressure (in mm Hg) Screening and Referral JNC 7/8 Based Guidelines*

Classification	Age	Systoli	Diastolic	Goal	Behavioral Advice See Table 2	Management Advice & Physician Referral *	Public Health Nursing Action**
Normal	All	< 120	< 80	< 120 / < 80	Lifestyle Modification	 Not necessary Recheck BP in 2 years unless on treatment. If on treatment and BP under control: advise follow up with treating physician 	 Advise to check at next routine visit with health care provider.
Pre-HTN	18- 59	120 < 140	or 80 < 90	< 120 / < 80	Lifestyle Modification	 Not necessary Recheck BP in 2 years unless on treatment If on treatment and BP under control: advise follow up with treating physician 	 Advise of need for usual health care provider to recheck within three months.
Diastolic HTN	18-59		≥90	< 90	Lifestyle Modification afterstabilization and physician advice	 High diastolic BP Physician referral for evaluation Confirm within 2 months If on treatment, advise BP reduction to 140/90 mm Hg or less Suggest discussing BP goals with physician 	 Advise of need for usual health care provider to recheck within three months.
Stage 1	18-59	140 < 160	or 90 <100	< 140 /< 90	Lifestyle Modification afterstabilization and physician advice	 High BP Physician referral for evaluation Confirm within 2 months If on treatment, advise BP reduction to 140/90 mm Hg or less Suggest discussing BP goals with physician 	Refer to usual health care provider for follow-up within a month or earlier.
Stage 2	18-59	≥ 160	or ≥ 100	< 140 / < 90	Lifestyle Modification afterstabilization and physician advice	 Recommend urgent physician evaluation within 1 week Complete documentation Give immediate referral sheet Acute Lite Threatening Event: If Systolic BP greater than 200 mm Hg and/or Diastolic BP greater than 120 mm Hg emergency referral within 24 hours and/or emergency procedures 	 Refer to usual health care provider within a week or earlier.
Critical	ALL	≥180	Or ≥ 110				 Refer to usual health care provider ASAP or emergency room if any symptoms for immediate check and treatment.
Hypertension	≥ 60	≥ 150	or ≥ 90	<140 / < 90	Lifestyle Modification after stabilization and physician advice	◆See Stage 1 or 2 above	◆See Stage 1 or 2 above
HTN If CKD or DM	All	≥ 140	or ≥ 90	< 140 / < 90	Lifestyle Modification afterstabilization and physician advice	◆See Stage 1 or 2 above	See Stage 1 or 2 above

^{*}Based on the average of two or more properly measured, seated BP readings on each of two or more office visits.

^{**} BP average at single visit

Table 2 Lifestyle Modifications to Prevent and Manage Hypertension

Modification	Recommendation	Advice and Referral
Weight reduction	Maintain normal body weight (body mass index 18.5-24.9 kg/m2)	 Take and record patient's weight and height Refer to physical activity counselor or available exercise facilities/resources Refer to nutritionist or dietician Refer to CDSME/DSME program
Adopt DASH eating plan	Consume a diet rich in fruits, vegetables, and low fat dairy products with a reduced content of saturated and total fat	 Refer to nutritionist or dietician Make diabetic and cardiovascular health diet charts, brochures & recipes available Refer to CDSME/DSME program
Dietary sodium reduction	Reduce dietary sodium intake to no more than 100 mmol per day (2.4 g sodium or 6 g sodium chloride)	 Refer to nutritionist or dietician Make diabetic and cardiovascular health diet charts, brochures and recipes available Refer to CDSME/DSME program
Physical activity	Engage in regular aerobic physical activity such as brisk walking (at least 30 minutes per day, 5 days per week)	Refer to physical activity counselor or available exercise facilities/resources
Moderation of alcohol consumption	Limit consumption to no more than 2 drinks (e.g., 24 oz. beer, 10 oz. wine, or 3 oz. 80-proof whiskey) per day in most men, and to no more than 1 drink per day in women and lighter weight persons	Suggest referral to Alcoholics Anonymous or other counsel ing services