The Patient With A Hypertensive Emergency / Urgency

WHY IS THIS IN BOOTCAMP?
Poorly controlled hypertension is common and may be primary or secondary to underlying acute pathophysiology or drug/medication effects. Physicians must be able to recognize patients who are experiencing end-organ complications from severely or acutely elevated blood pressure and distinguish them from individuals with severe asymptomatic hypertension in order to plan the urgency of treatment and work up.

SESSION ABSTRACT
In this session you will learn the differences between hypertensive urgencies and emergencies and how to evaluate and manage these presentations.

PREPARATION FOR THIS SESSION

SESSION OBJECTIVES FOR RESIDENTS
1. Use a systematic approach to history, physical examination, and investigations to:
   - determine whether your patient is experiencing accelerated target organ damage (i.e. hypertensive emergency)
   - identify precipitants or underlying causes for presentation

2. Write appropriate orders for patient with hypertensive urgency/emergency including:
   - rational choice of agent(s)
   - treatment targets and plan for monitoring
   - appropriate investigations

3. Recognize indications for getting help and how to get it (i.e. consulting other services, need for other care setting)

RESOURCES FOR FUTURE REFERENCE
1. Canadian Hypertension Education Program Recommendations
   https://www.hypertension.ca/en/chep

2. See above (preparation for this session)

POSSIBLE POINT OF CARE RESOURCES / APPS TO CONSIDER
1. CHEP Canadian Hypertension Recommendations app available at:
   https://www.hypertension.ca/en/chep