

HYPERTENSIVE URGENCY

Transfer Criteria

- Acceptable VS
- BP<250/130 after initial treatment (nifedipine, labetalol, clonidine, etc.)
- Normal mentation
- Asymptomatic or without evidence of end-organ injury

Exclusion Criteria

- Unstable VS
- BP>250/130 after initial treatment
- Evidence of end-organ injury: retinal hemorrhage, papilledema, CHF, acute renal failure, cardiac ischemia or intracranial hemorrhage, hypertensive encephalopathy, CVA, aortic dissection, focal neurologic abnormalities
- New EKG changes
- Eclampsia
- Anti-hypertensive drip required for control of BP

Potential Intervention

Anti-hypertensive medications
Serial VS and neurologic exams
TMS monitoring
Pulse oximetry as needed

Disposition

Home - Acceptable VS
BP<200/110
Asymptomatic
Outpatient treatment and follow-up arranged

Hospital - Development of any exclusion criteria
Symptoms worsen or persist
BP>200/110