

Target population

Target population: Consecutive patients attending diabetes eye screening appointment

- Diet and exercise advice given
- Check BP – check pulse before measuring BP. If pulse irregularity is present, measure BP manually. If irregular pulse, refer back to GP.

Low BP

BP $\leq 90/60$ mmHg:

- If patient is fainting or regularly feeling like they will faint, refer for same-day GP assessment
- If no symptoms, written correspondence to GP to inform of BP result

Normal BP

Age under 80 years: Clinic BP $<140/90$ mmHg, HBPM $<135/85$ mmHg:

- Written correspondence to GP to inform of BP result, annual review of BP at diabetes review appointment
- GP to consider target of $<130/80$ mmHg if type 1 diabetes plus ACR of ≥ 70 mg/mmol **or** if chronic kidney disease plus ACR of ≥ 70 mg/mmol

Age over 80 years: Clinic BP $<150/90$ mmHg, HBPM $<145/85$ mmHg:

- Written correspondence to GP to inform of BP result, annual review of BP at diabetes review appointment
- GP to consider target of $<140/90$ mmHg if chronic kidney disease plus ACR of <70 mg/mmol **or** target of $<130/80$ mmHg if chronic kidney disease plus ACR of ≥ 70 mg/mmol.

Raised clinic BP

Age under 80 years: Clinic BP $140/90$ – $179/119$ mmHg,

Age over 80 years: Clinic BP $150/90$ – $179/119$ mmHg:

- Advise patient to take home BP readings for 4 days if already known to have hypertension, or for 7 days if not known to have hypertension
 - The diary sheet has information on how to take a BP twice daily for 7 days, supportive self-management, advice on BP targets and safety-netting advice
- If no access to BP monitor and unable to purchase one, loan BP monitor (validated machine) with appropriately sized cuff

Raised home BP

Age under 80 years: HBPM $135/85$ – $169/104$ mmHg,

Age over 80 years: HBPM $145/85$ – $169/104$ mmHg:

- Written communication to GP to advise newly diagnosed with hypertension or, if already known to have hypertension, requiring treating to target as per NICE guidance

Very high BP

Clinic BP $\geq 180/120$ mmHg or HBPM $\geq 170/105$ mmHg:

- Same-day assessment with GP, consider A&E, treat according to NICE BP guidance

Figure 1. Hypertension case-finding pathway, including blood pressure thresholds and interventions.

ACR=albumin:creatinine ratio; BP=blood pressure; HBPM=home blood pressure monitoring.