

High Blood Pressure Reading in the Pharmacy

NICE NG136 (2019, updated 2023) | NHS HCFS

■ ACTION: Call 999 Immediately

- Chest pain, tightness, or sudden tearing pain radiating to the back
- Severe or sudden-onset headache with a very high reading
- Facial weakness, arm weakness, or difficulty speaking (stroke signs)
- Confusion, altered consciousness, or breathlessness at rest
- Visual disturbance or sudden visual loss
- Severe hypertension in pregnancy, or any symptoms of pre-eclampsia (headache, visual disturbance, swelling, upper abdominal pain)

Do not ask the patient to make their own way to hospital. Call 999 and stay with them. If a patient appears acutely unwell at any BP level, clinical judgement overrides thresholds.

SCENE: Pharmacy Assessment Framework

S	Symptoms of organ damage?	Headache, chest pain, visual symptoms, stroke signs, breathlessness: these require 999, not reassurance.
C	Context and background?	Known hypertensive? Pregnant? Missed doses? Recent caffeine, exercise, anxiety, steroid, or stimulant use?
E	Emergency or same-day?	Symptoms + very high BP: call 999. Severe BP without symptoms: same-day assessment. Severe asymptomatic hypertension is not a hypertensive emergency, but still requires same-day assessment.
N	Number: repeat before acting	Sit quietly for 5 minutes, then repeat. A single high reading rarely determines management.
E	Escalate or reassure?	Escalate: very high reading with symptoms, or any hypertension in pregnancy. Reassure: mildly elevated, rested, asymptomatic, no red flags.

■ ACTION: Same-Day Assessment (GP or 111)

- Systolic above 180 or diastolic above 110, symptom-free: same-day assessment required
- Readings 160-179 with headache, visual symptoms, or chest symptoms
- Known hypertensive with readings significantly above usual level
- Any hypertension in pregnancy: same-day maternity assessment

Severe asymptomatic hypertension is not a hypertensive emergency, but still requires same-day assessment. Symptoms and organ damage determine urgency, not the number alone.

✓ ACTION: Reassure, Advise, and Follow Up

- Mildly elevated, no symptoms, calm rested patient: repeat after 5 minutes; lifestyle advice
- Lifestyle advice: reduce salt and alcohol, stop smoking, increase activity
- Recommend home monitoring with a validated device
- If enrolled in NHS Hypertension Case-Finding Service: follow the commissioned pathway and local eligibility criteria when deciding whether to offer ABPM

ABPM is the gold standard for confirming hypertension (NICE NG136). Daytime ABPM average of 135/85 or above confirms the diagnosis.

Key reminders: Symptoms matter more than numbers. Severe asymptomatic hypertension needs same-day review, not 999. A single reading does not diagnose hypertension. In pregnancy, pre-eclampsia can progress rapidly: urgently refer if symptoms are present.