

# Hypertension Management Treatment Plan

Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Patient ID: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Provider Information

Provider Name: \_\_\_\_\_

Practice Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

## Diagnosis

Primary Diagnosis: Hypertension (ICD-10: I10)

## Goals of Treatment

- Achieve and maintain a target blood pressure of
- Reduce the risk of cardiovascular complications.
- Promote lifestyle modifications to support overall health.

## Treatment Plan

### Medications

- Medication 1: \_\_\_\_\_ - Dosage: \_\_\_\_\_ - Frequency: \_\_\_\_\_
- Medication 2: \_\_\_\_\_ - Dosage: \_\_\_\_\_ - Frequency: \_\_\_\_\_

### Lifestyle Modifications

- Diet: Follow DASH diet, reduce sodium intake.
- Exercise: Aim for at least 150 minutes of moderate exercise weekly.
- Weight Management: Maintain a healthy weight through diet and exercise.
- Avoid smoking and limit alcohol consumption.

## **Follow-Up Appointments**

Follow-up Date: \_\_\_\_\_

Purpose: Reassess blood pressure and medication effectiveness.

## **Additional Notes**

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## **Provider Signature**

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