BP Thresholds and recommendations for treatment and follow up

**Normal BP** (<120/80)

- Promote optimal lifestyle habits

**Elevated BP** (120-129/<80)

- Optimize lifestyle habits (non-pharmacological treatment)

**Stage 1 HTN** (129-139/80-89)

- Perform ASCVD risk assessment

- Clinical ASCVD or estimated 10-y CVD risk > 10%
  - No
  - Yes

  **Yes**
  - Enroll in SMBP to confirm diagnosis
  - Review SMBP results in 4 weeks

  **No**
  - Optimal - Enroll in SMBP to confirm diagnosis OR reassess in 3-6 months
  - Enroll in SMBP to confirm diagnosis
  - Review SMBP results in 4 weeks

**Stage 2 HTN** (>140/90)

- Enroll in SMBP

- Review SMBP results in 4 weeks

- Discharge SMBP

*The target BP for patients using SMBP should be <130/80 especially for Stage 1 patients who entered the program with a BP in the 130s/80s range

**BP Goal met?**

- Yes
  - Instruct patient to take BP 1-2 days/week for 1 month
  - BP is stable at or below goal?
    - Yes
      - Discharge SMBP
    - No
      - Consider intensification of therapy and/or assign a new cadence for SMBP

- No
  - Assess and optimize adherence to treatment
  - Consider intensification of therapy and/or assign a new cadence for SMBP

**BP Goal not met?**

- Yes
  - BP is stable at or below goal?
    - Yes
      - Discharge SMBP
    - No
      - Ask patient to re-start SMBP 10 days or so before their next follow up in-office or telehealth visit

- No
  - Asking the patient to re-start SMBP 10 days or so before their next follow up in-office or telehealth visit may reduce SMBP fatigue

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**Confirmed**: treat as indicated and reassess

**Not confirmed (normal or elevated)**: reassess in 3-6 months

**Not confirmed and status worsened (masked Stage 2)**: treat with non-pharmacological and pharmacological treatment

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Example of ASCVD calculator can be found at tools.acc.org/diabetes risk estimator/index.html#1/calculate/estimator