

East Jefferson General Hospital

Hypertensive Crisis: Urgency and Emergency

March 2020

Hypertensive Crisis I16.9 (cc)

(Intended to encompass both hypertensive urgency and emergency)

Is defined by American Heart Association as two consecutive blood pressure readings of:

Systolic BP 180 OR Diastolic BP \geq 120

Includes damage to blood vessels, including inflammation, leakage of fluid or blood and can lead to stroke, headache, heart failure, loss of consciousness, and eclampsia.

Hypertensive Urgency I16.0

Hypertensive Crisis without evidence of organ damage

- Symptoms that may include:
 - Severe headache, shortness of breath, nosebleeds, severe anxiety.
- Treatment: Gradual reduction of blood pressure.
- Medications: Clonidine, Lopressor, Vasotec, and Hydralazine, and other oral/topical antihypertensive medications

Hypertensive Emergency I16.1 (cc)

Hypertensive Crisis with evidence of organ damage

- Symptoms may include
 - Chest pain, back pain, difficulty speaking, shortness of breath, visual changes
- Treatment: Requires immediate reduction in BP, and often, ICU admission for frequent monitoring of vital signs and neurological status.
- Medications: IV antihypertensives that may include Nitroglycerine, Cardene, Nipride, Labetalol, hydralazine, and others.
- Types of associated organ damage:
 - Cardiovascular: Acute or acute on chronic heart failure, unstable angina, myocardial infarction.
 - Renal: Acute kidney injury
 - Neurological: Seizure, stroke, brain hemorrhage, Aortic dissection

Other Related Diagnosis

- Consider Hypertensive Encephalopathy when the following are present:
 - Systolic BP > 200, Diastolic BP > 120
 - Headache
 - Patient is Obtunded
 - Confusion
 - Stupor
- Please document improvement in mental status with normalization of blood pressure.

Documentation Considerations

- Please note:
 - When hypertension is documented as accelerated or malignant, essential hypertension (I10), is reported.
 - When appropriate, based on clinical indicators and treatment of the hypertension, please consider whether or not a more specific diagnosis, such as Hypertensive Urgency or Hypertensive Emergency may be more appropriate.
 - This will assist in accurately reflecting the severity of illness of the patient you are treating.



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