



Dear Health Care Provider:

We have referred \_\_\_\_\_ to your office as a result of high blood pressure readings taken on (date) \_\_\_\_\_. After s/he rested for at least five minutes, we obtained a blood pressure of \_\_\_\_\_. We have advised her/him to seek medical attention as soon as possible.

Attached is a table listing all blood pressure taken in the recent past.

Sincerely, \_\_\_\_\_

Date                                      Systolic Blood Pressure                                      Diastolic Blood Pressure


Below are the criteria for referrals:

- **Normal BP range:**
  - Systolic Blood Pressure (SBP): **90-120** mmHg
  - Diastolic Blood Pressure (DBP): **60-80** mmHg
- **Hypotension:** Refer to PCP if:
  - SBP less than or equal to **90** mmHg
  - DBP less than or equal to **60** mmHg
  - **WITH NO** symptoms: headache, dizziness, fainting
  - **WITH** symptoms, refer to emergency care immediately
- **Hypertension:** Refer to PCP if:
  - SBP greater than or equal to **140** mmHg
  - DBP greater than or equal to **90** mmHg
  - If diabetic, BP's greater than or equal to 130/80 mmHg
- **Hypertensive Crisis**
  - SBP greater than or equal to **180** mmHg **OR**
  - DBP greater than or equal to **110** mmHg
  - Refer to PCP within 24 hours if asymptomatic

Refer to ER if symptomatic: headache, dizziness, short of breath, anxiety etc.