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# Diploma in Pharmacy 2<sup>nd</sup> Year

## Pharmacotherapeutics

### Experiment

To Prepare and Discuss notes on Subjective, Objective, Assessment and Plan for Hypertension ( real / hypothetical )

#### Aim:

To Prepare and Discuss notes on Subjective, Objective, Assessment and Plan for Hypertension ( real / hypothetical )

#### Reference :

‘ Dr. Gupta G.D. , Dr. Sharma Shailesh, Dr. Sharma Rahul Kumar, “Practical Manual of Pharmacotherapeutics” Published by Nirali Prakashan, Page no 1 - 4

#### Theory :

#### 1.Hypertension:

##### i) Case I

##### a. Subjective:

- **Name:** LR                      **Age:** 52 yrs                      **Sex:** Female
- **Unit:** MED II                      **DOA:** 10/02/2007
- **Reason for Admission:** shortness of breath and palpitations.
- **Past Medical History:** prehypertension, dyslipidemia, and type 2 diabetes
- **Past Medication History:** sulfonylurea and metformin twice daily for her diabetes and atorvastatin daily for he dyslipidemna
- **Family History:** hypertension, type 2 diabetes, and myocardial infarction (MI) (father at age 62 and mother at age 68)
- **Allergies and Social History:** Nil

## **b. Objective:**

- **Height:** 5'4"
- **Weight:** 175 lb
- **Gait:** Steady
- **BP:** 146/86 mmHg
- **PR:** 110 bpm
- **CVS:** Normal ECG
- **RS:** 20
- **CNS:** unremarkable
- **Temperature:** 37.5°C

## **c. Assessment:**

- **Lratory Assessment:** Laboratory evaluation revealed a random
  - Glucose Test with value of 180 mg/dl.
  - Triglycerides of 185 mg/dl,
  - total cholesterol of 225 mg/dl,
  - HDL cholesterol of 52 mg/dl.
  - LDL cholesterol of 132 mg/dl, and
  - Hemoglobin Alc (A1C) of 76%
- 10-year coronary heart disease risk was calculated and noted to be 11%, with an average risk for her age of 8% (low risk for her age would be 5%), giving her a relative risk of 2.2.

## **d. Plan:**

- **Management:**
  - Referred for a medical nutrition therapy consultation for dietary modification.
  - Advised for brisk walking program each evening for 30 minutes.
  - Scheduled for an exercise treadmill test and
  - Asked to return to the office for follow-up in 6 weeks.

## ii) Case II

### a) Subjective:

- **Name:** L.R.
- **Age:** 50 yrs
- **Sex:** Female
- **Unit:** MED II
- **DOA:** 10/09/2012
- **Reason for Admission:** Headache, nausea, drowsiness, blurred vision, and fatigue.
- **Past Medical History:** Patient was suffering from Diabetes Mellitus Type 2 since 2 years.
- **Past Medication History:** She was using vildose (vidagliptin) 50 mg OD since 2 years.
- **Family History:** NA
- **Allergies and Social History:** Nil

### b) Objective:

- **Height:** 5'2"
- **BP:** 150/100 mmHg
- **CVS:** Normal ECG
- **CNS:** unremarkable
- **Weight:** 72 Kg
- **PR:** 88 bpm
- **RS:** 22
- **Temperature:** 38.3°C

### c) Assessment: Laboratory findings of blood glucose level

- Fasting = 140mg/dl
- Random = 180mg/dl

### d) Plan:

- **Interventions:**

- Suggest the physician to change the drug therapy for hypertension by prescribing the antihypertensive medication of two combinations instead of TRIFORGE.
- Sitamet should be taken with meal twice daily.
- Interactions between different drugs were checked.
- > There was no interaction between Sitamet, Triforge and Monitor
- Counsel the patient to stick to drug regimen and show good compliance.
- Suggest patient to routinely monitor blood pressure and to check HbA1C level after every 3 months

• **Medications:**

Brands	Generics	Strength	Frequency
Monitor	Bisoprolol Fumarate	5mg	OD
Triforge	Amlodipine/Valsartan/Hydrochlorothiazide	5/160/12.5mg	OD
Sitamet	Sitagliptin + Metformin HC	50mg+1000mg	BD

- **Care Plan:** Life style modifications.
  - Exercise and walk to reduce body weight
  - Proper diet rich in fruits, vegetables, whole grains, low fat poultry and fish
  - Low dietary salt and sugar intake
  - Avoid red meat, fats and alcohol.

**Result :**

Notes on subjective, objective, assessment and plan for Hypertension (real/ hypothetical) disease conditions was prepared and discussed.

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