



**Title: Algorithm Based on JNC-8**

**Date Created: 11/30/2015**

**Date Modified: N/A**

**Date Approved by Board of Directors: 12/08/2015**

**Clinical Guideline # CGC-CG-11**

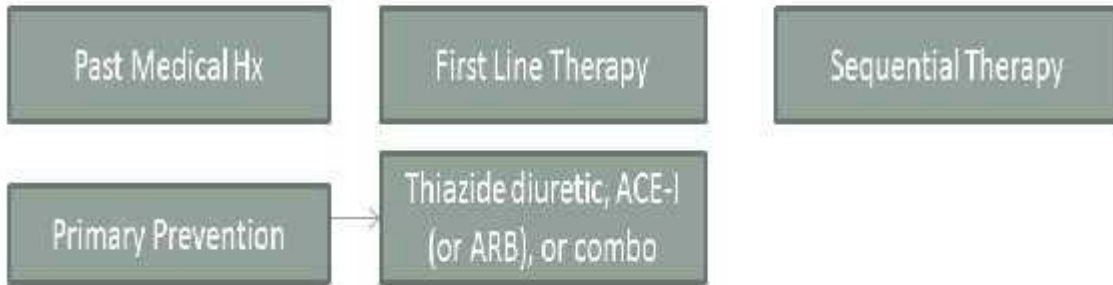
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**Purpose:** To establish a guideline for providers PPS wide in treating Cardiovascular Diseases and Disorders.

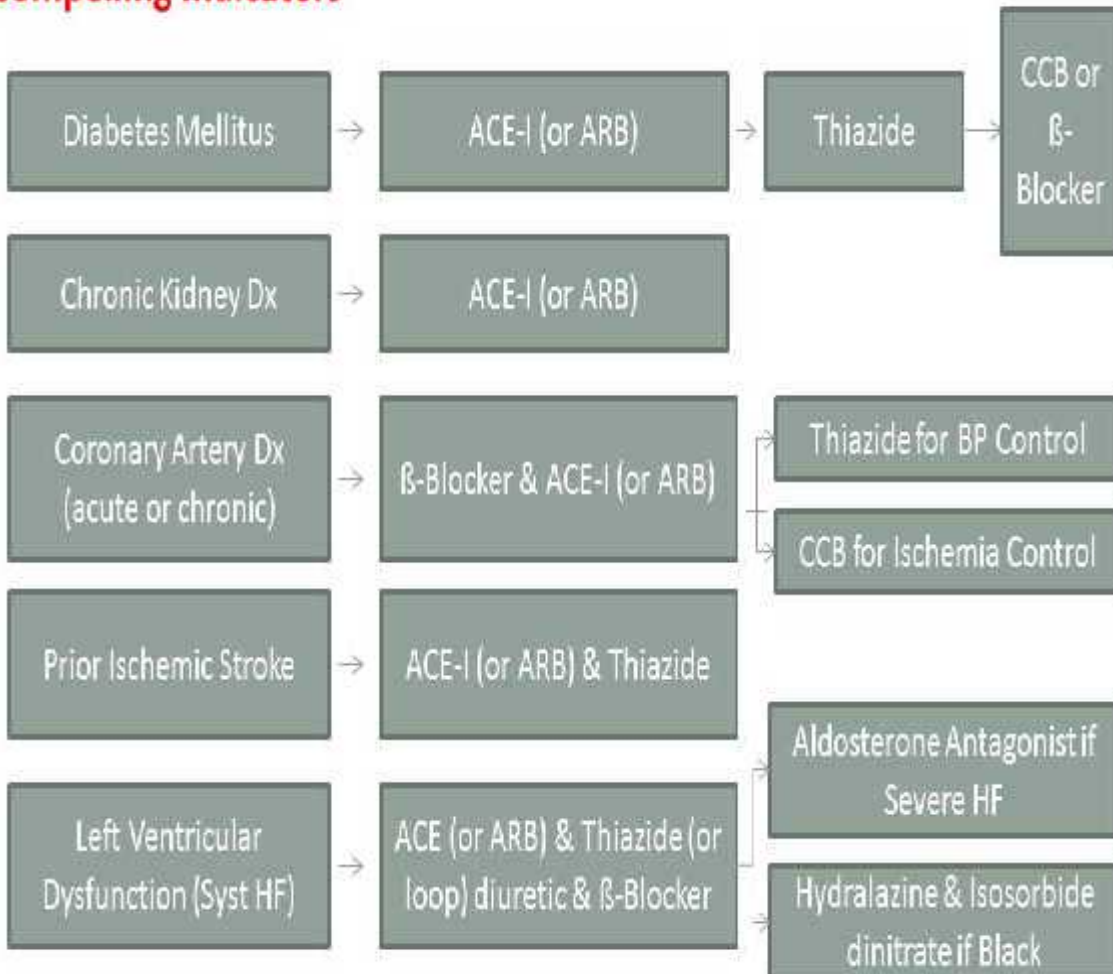
**Clinical Guideline:** Utilizing JNC 8 to treat patients with a diagnosis of hypertension. The following information includes goal blood pressures based on age, race, and/or comorbidities based on evidence based studies exhibited in the JNC 8 document. Also you will find the AHA-13 algorithm, which should be utilized to treat patients with a diagnosis of high blood cholesterol.

Note: The following document is a clinical guideline based on evidence based medicine and recommended best practices for DSRIP purposes. At no time should this document supersede existing hospital, practice, or state policies.

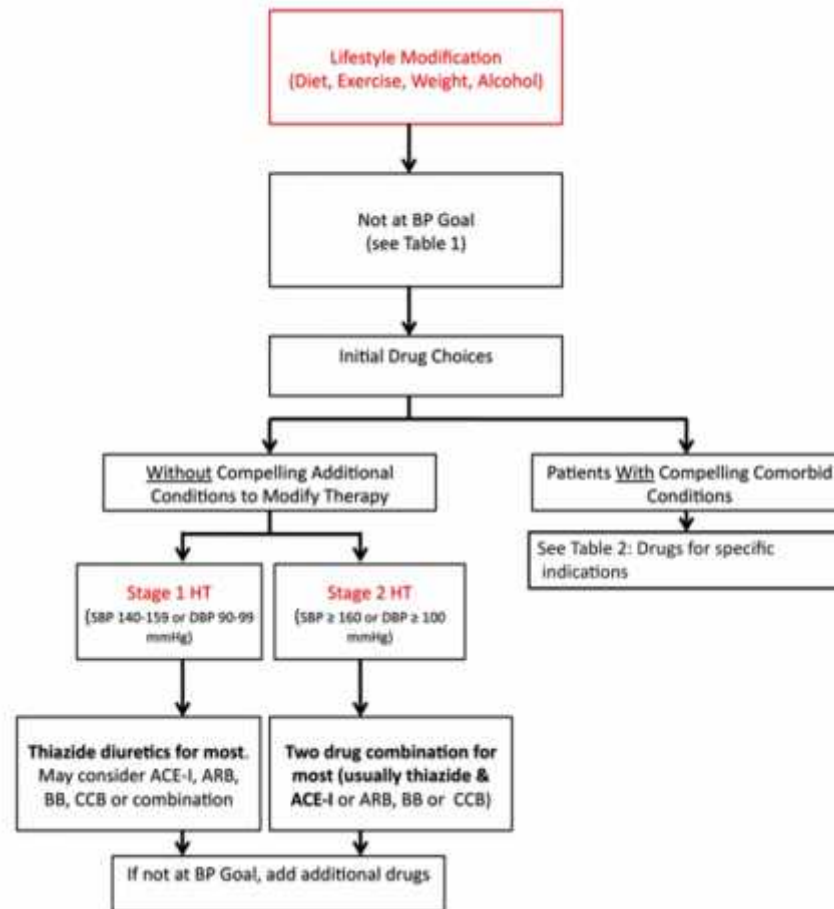
The table below illustrates the suggested first line and sequential therapy for compelling indicators. Please use this table along with your best clinical judgment when determining first line and/or sequential therapy.



### Compelling Indicators



The tables below are the primary algorithms of JNC 8. Please use this table along with your best clinical judgment to establish initial treatment modalities.



**Lifestyle Modification  
(Diet, Exercise, Weight, Alcohol)**

NO Diabetes or CKD

Diabetes or CKD

Age ≥ 60

Age < 60

All Ages Diabetes Present-No CKD

All Ages CKD Present (+\_Diabetes)

SBP < 150  
DEP < 90

SBP < 140  
DEP < 90

SBP < 140  
DEP < 90

SBP < 140  
DEP < 90

Non Black

Black

Thiazide, ACE-I, ARB or CCB  
(alone or combination)

Thiazide, or CCB  
(alone or combination)

ACE-I or ARB  
(alone or with other drugs)

BP Goal

*When PPS clinical protocols and pathways are developed through the Clinical Governance Committee(s) of the PPS and approved by the CCN Board of Directors and are applicable to Partner Organization's delivery of health care services and project participation, such protocols and pathways shall not (1) override the professional judgment of Partner Organization and its licensed health care professionals in treating patients in individual cases or (2) interfere with the governing body/established operator of any licensed health care facility or its medical staff in overseeing the provision of clinical services to patients and the quality of care.*

**Clinical Guideline Board Approval History:**

**Clinical Guideline Revisions:**

Date	Revision Log	Updated By

**This Clinical Guideline shall be reviewed periodically and updated consistent with the requirements established by the Board of Directors, Care Compass Network’s senior management, Federal and State law(s) and regulations, and applicable accrediting and review organizations.**