**Referral pathway for resistant hypertension**

**ACR to PCR**

**NOTE: An ACR of 70 is comparable to a PCR of 100 both of which equate to 1g proteinuria/24 hours**

**NOTES: patients who respond to but are intolerant of medications should not be referred unless they meet the referral criteria in the pathway**

**Resistant hypertension**

**No concerning features**

**Maximise treatment**

**Home monitoring**

**Monitor ACR and U&E**

**Unable to control on 3 agents**

**Declining renal function**

**Raising urine ACR/PCR**

**Suspicion of secondary cause of hypertension**

**Referral to Nephrology OP**

**Check U&E**

**Check eye for retinal haemorrhage/ papilloedema**

**Dip urine for protein and send PCR**

**Clarification with home monitoring if non severe**

**New Bp >180/120**

**Retinal changes**

**New chest pain, Cardiac failure or AKI**

**Urgent referral to local AMU/ED**

**New Severe hypertension >180/120**

**OR**

**Resistant hypertension on 3 or more medications**