

Pathway to identify and control high blood pressure in clinical exercise settings

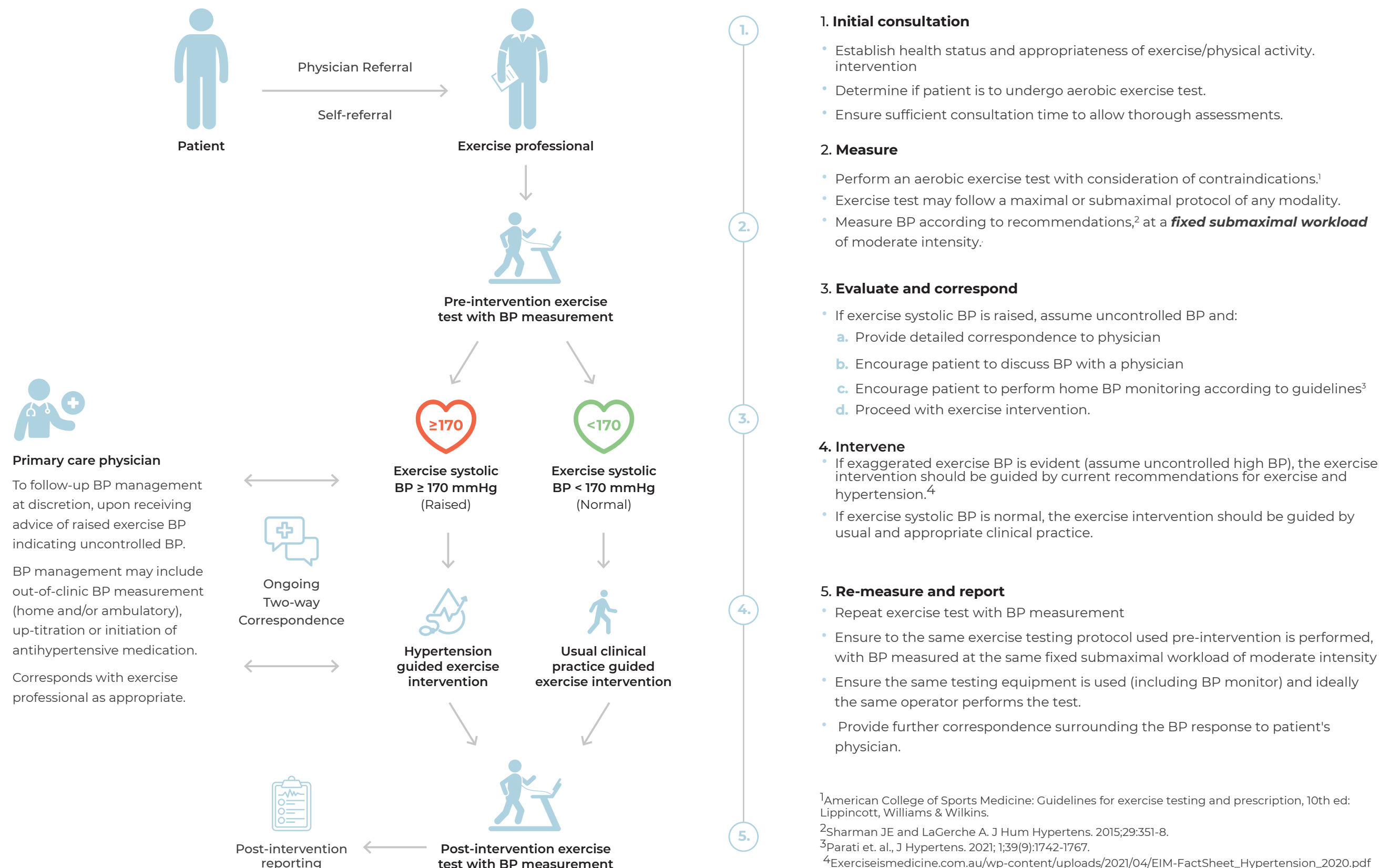


Figure S1: Pathway to identify and control high blood pressure in clinical exercise settings.

(Date)

Dear (Dr name),

RE: (full patient name), (date of birth)

Thank you for referring (name) for exercise and lifestyle intervention related to (health condition).

On (date), (name) completed a submaximal exercise test as part of an initial assessment undertaken prior to commencing an exercise training intervention.

Blood pressure (BP) was recorded at rest (following guidelines) and in a standardised manner during a moderate intensity of exercise (values are reported in table below).

	Recorded values	Reference range*	Interpretation
Resting BP	136/85 mmHg	<140/90 mmHg	Within normal limits
Exercise BP	189/90 mmHg	Systolic BP <170 mmHg	Above normal limits

Recent research evidence suggests exaggerated (elevated) exercise BP is associated with increased risk of high BP-related cardiovascular disease that may not have been picked up from normal measures of BP in the clinic at rest.¹

Although (name's) BP can be considered within normal limits at rest, the value of BP during exercise indicates a potential lack of BP control that may warrant further investigation via out-of-clinic BP measures.

I have therefore encouraged (name) to complete home BP monitoring according to guidelines,² and they will bring the completed diary to their next appointment with you for review.

I will be proceeding with an exercise intervention that assumes the presence of uncontrolled high BP, and as such would also appreciate any correspondence from you about the course of action you have taken (if any) to monitor or manage (names) BP.

Kind regards,

(Exercise professional name)

1.Schultz MG, La Gerche A and Sharman JE. Blood Pressure Response to Exercise and Cardiovascular Disease. Current hypertension reports. 2017;19:89.

2.Sharman JE, Howes FS, Head GA, McGrath BP, Stowasser M, Schlaich M, Glasziou P and Nelson MR. Home blood pressure monitoring: Australian Expert Consensus Statement. J Hypertens. 2015;33:1721-8.

* Note the reference range for classifying high blood pressure differs in the United States of America, with high blood pressure considered as $\geq 130/80$ mmHg.

Figure S2: Example correspondence from an exercise professional to a primary care physician.