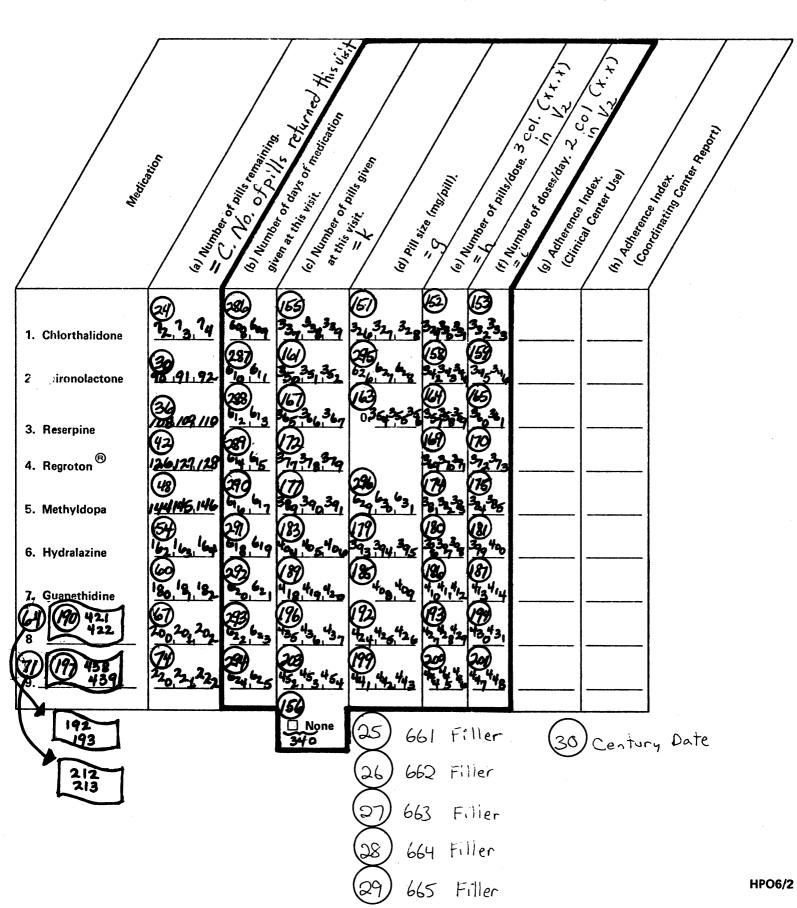
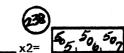
1 Proge	ram Number: 3,4 5,6	789 10 11		042074
	e: (PRINT IN BLOCK CAPITA	(I)	<u>Z</u>	2 Batch 18. 19. 2021, 22, 23 24, 25
(Mr.	, Miss, Mrs.) Last		First	Middle
6	Month Day Y	ear		
3. Date:	2 2 2 20 20 20 20]		
		(a) □ a.m.)	5. Changes required in None	in identifying information: HP11A attached
4. Time	arrived: 32,33 : 34,35	p.m. 36		
	COMPLETE THE SECTION	BELOW AT TERMINATION	ON OF VISIT BEFORE P	ARTICIPANT LEAVES
6. Is pa	rticipant at goal blood pressure	Yes No at this visit?		
7. Revie	ew of completed HPO6			
	Every item on each page is co	mplete and legible.		
	Name and Program Number a	re correct.		
	Antihypertensive medication r	eceived (or none prescribed)).	
	Columns (a) through (f) of Ite	m 10 completed.		
	Flow Sheet for Blood Pressure	, Weight and Medications up	pdated.	
	IF FOUR-MONTH VISIT:	☐ ECG completed		
		☐ Blood sample drawn		
		☐ Urine specimen collec	cted	
		☐ Item 18 completed		
	Special Purpose Reports, if rec	quired, have been initiated.		
	Appointment slip given:			
	Clinic Revisit schedul	e is: 🗆 Step-Up Sche	dule (2 weeks)	
		☐ Maintenance S	Schedule A (4 weeks)	
		☐ Maintenance S	Schedule B (8 weeks)	
		☐ Step-Down Sc	chedule (specify interval: .)
		☐ Individualized	Therapy (specify interval	l:)
	Date of next visit:	Day Year	Hour Minute (51,52): 53,54	a.m. 55
8. Time	Hour 56.57 :	Minute		J
Thie	section completed by	J		18 6, 62



042074

(Complete column (a) and, if desired, column (g) before physician's review; complete columns (b) through (f) after medications have been dispensed; complete column (h) after receiving report from coordinating center.)



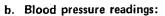


Systolic

a. Pulse: Beats in 30 seconds_

beats/minute.

I will be taking six blood pressure readings, four of them while you are seated and two of them just after you stand up.



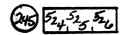


Diastolic (5th phase)

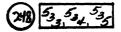
Reading 2 (R-Z)

Zero

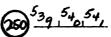
Corrected



Reading 3 (Std)



Reading 4 (R-Z)

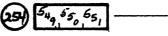


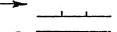


Zero



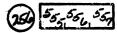
Corrected





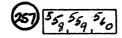
Average of Readings 2 and 4

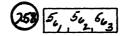




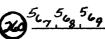
SUM

Reading 5 (Std) (One minute after standing)





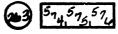
Reading 6 (R-Z) (One minute after standing)



Zero



Corrected

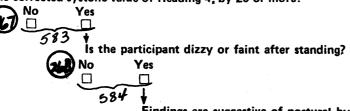


c. Is SUM less than 180?



e. Remarks:

d. Is the corrected systolic value of Reading 6 lower than the corrected systolic value of Reading 4, by 20 or more?



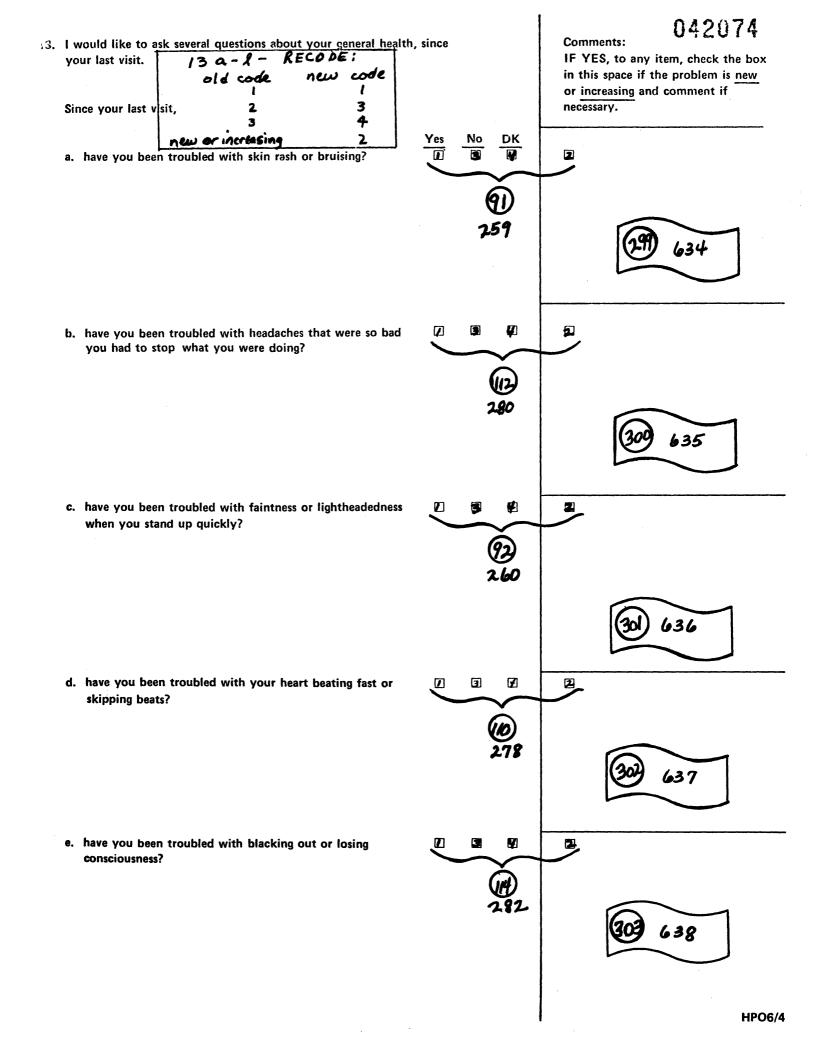


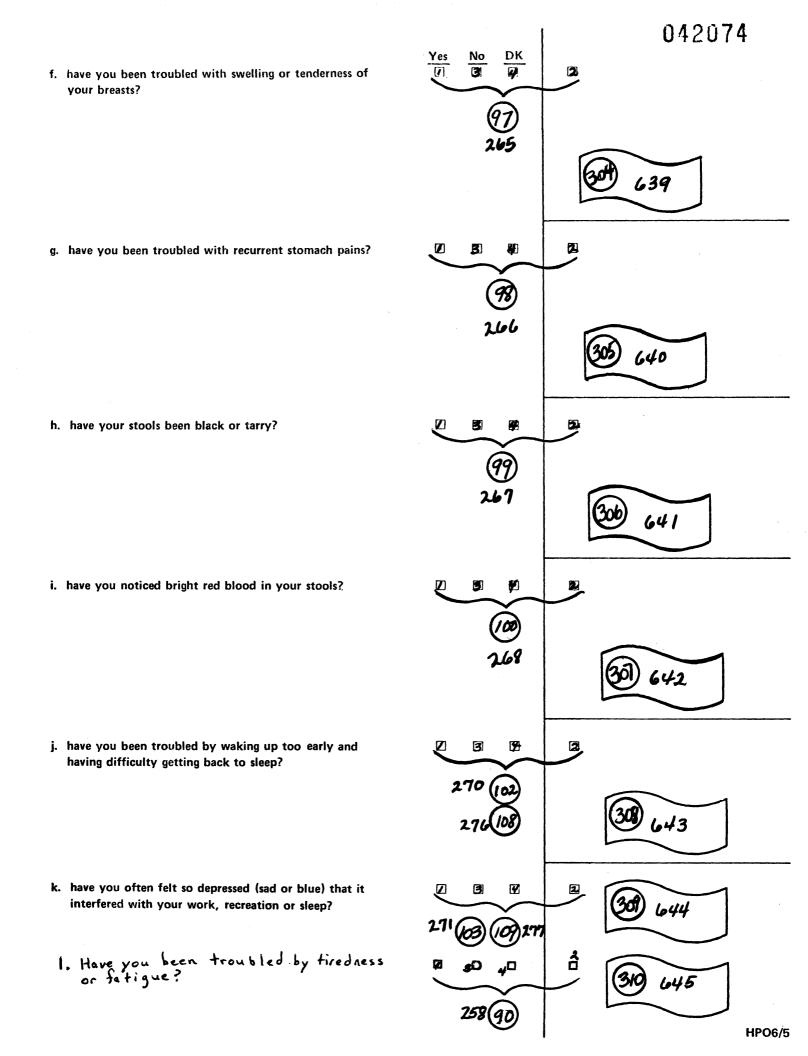
Findings are suggestive of postural hypotension.



Percent of ideal weight (From standard table)





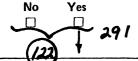


14. Since your last visit, were you unable to perform your usual activities because of sickness or disability?



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15. Have you seen any doctors because of illness since your last visit?



(122) +				
Date	Doctor	Illness	Treatment	Results
			·	

16. Have you had to stay overnight in a hospital since your last visit?



How many different times were you admitted to the hospital?



Complete Notification of Non-Fatal Event (HPO8) for each different visit.

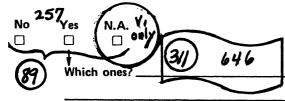
17. a. Would you please list for me each medicine you are now taking and how often you take it?

Medication: 96 253,254

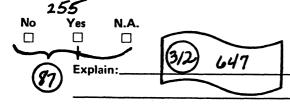
01/

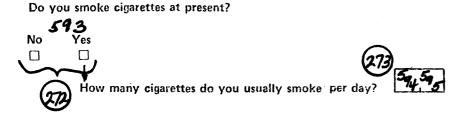
Times/day _____

b. Thinking only of the medicines we gave you at your last visit, have you run out of any of them?



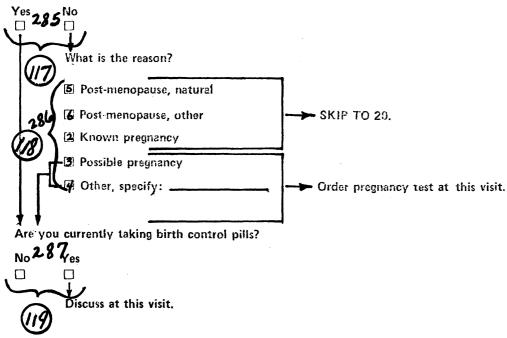
c. Again, thinking only about the medicines we gave you at your last visit, are you having any problems taking these pills?





FOR MEN SKIP TO 20.

19. Have you had a menstrual period within the past six weeks?



Physician's Review of Participant Status:

20. Interval clinical findings of importance.





		Decision made by					
Medication		D	НР	Other Physician		Participant	
	Medication Reason		Physician	HP concurs	HP does not concur	HP concurs	HP does not concur
1. 2. 3. 4. 5.	314)	649					

Was other therapy required for possible side effects?



- 22. On the basis of all information available at this time, does this participant have:
 - a. A new indication for any Special Test?



b. A new condition requiring notification of non-fatal event (myocardial infarction, stroke, or hospitalization)?



c. A new condition suggesting a critical toxic reaction?



d. A change in drug contraindications or precautions?



Yes 31 (No			04207	Ą
Is participant being advanced to next Treatment Step?				
Yes 317 _{No}				
Why was choice made to not increase medication the	nis visit, despite fa	ailure to achieve g	joal?	
319 (1941) - Participant not taking present medications regul	arly or missed do	ses recently.		
323 (48) Side effects from present medications at present	dose.			
319 Present medications may not yet have reached p	eak effect.			
☐ Blood pressure is close to goal and may reach go	al without medic	ation change.		
324 (49) Other, specify: 317 653				
24. Remarks on further management plans, diagnostic evaluation or other	r matters:			
318 654				
25. The Clinic Revisit schedule is:				
Step-Up Schedule (2 weeks) Maintenance Schedule A (4 weeks)				
Maintenance Schedule B (8 weeks)		امما المعادية	ws)	
1 . 198 40 1) weeks (conv	ger too tight o	37.7(217)	
Individualized Therapy (specify interval:) days (218)			
26. Since the last visit, or at this visit, has participant received consultat	ion concerning:			
(325) 661 FILLER		Yes		No
	By physician	By therapist	By counselor	
326 662 FILLER a. drug adherence? 483 (19)	□ 484€29	□ 4 85 00)	□ 486 @	
(321) 663 FILLER b. cigarette smoking? 487	□ 488 22	□ 489 æ	🗆 ५१०	
c. diet?	□ 492 (228)	U 493629	□ 4# 63¢	
328 664 FILLER d. weight? 495 3	U 446(32)	· 447.53		
329 665 FILLER Physician			238	49.50
Therapist				50, 50
Health Counselor			<u></u>	503,504
319) version 1 dated 01/15/13				HPO6/9

23. Has participant reached goal blood pressure (below 90 mm Hg)?

HP06

Version 2

(19) 10-	Commission U	DOGA imptend of Itamia 47.6	10 6-1	
17. Blood Pressure M		PO6A instead of Items 17-1	19,below.	
a.Pulse: Beats in 30 s		x 2 = b	eats/minute.	
			scated and one of them after you	ı etand un
b.Blood pressure read	linae.		 	a stand up.
biblood protodio rodd	Systolic Systolic	Diastolic (5th pha	se)	
R-Z Reading 1	514.515.516	29517 518,519	666	
_	(243) 52 52.	522 522	Participant's Goal:	
Zero	((x14) <u>x2, x3</u>	or bel	
Corrected	(245) 524 525 526	246 37, 328, 34	c. Is the Average Diact	olic BP
R-Z Reading 2	(249) 536. 537. 538	259 539 540, 541	No Yes	
Zero	(251) 543, 543	252 544 845		
	S. 5. 5.	5- 5-	d. Is Reading 3 (correct	
Corrected	253 46. 47. 48	49.0.51	than Reading 2 (cor 20 or more?	rected systolic/ by
SUM of Corrected Re	eadings 55, 55, 55,	(56) 55, 55, 557	No Yes	Is the participant dizzy
	53 3.34	5.36.37	$Q(0) \square \longrightarrow$	or faint after standing?
Average of Corrected				No Yes
(SUM divided by 2	<u> </u>		268	<u> </u>
R-Z Reading 3	\$59564.565.566	(269567 568 569	e. Remarks	Findings are suggestive of
(2 minutes after	5, 5,	57 - 57 -		postural hypo-
Zero	261 -70.11			tension.
Corrected	663 574, 575, 576	26 577 578 379		
(269)				$(27)_{5}$
18. Weight: 585,386,5	587 19. Observer:			$\frac{}{}$
	IDENTIFYING INF	ORMATION (complete at I	beginning of visit)	
1. Program Number:				in identifying information
<u> </u>			None	HP11A attached
2. Name: (PRINT IN B	LOCK CAPITALS (1)	. 13. 14. 15. 16.17	$\widehat{}$	
			(2)	D./ OF
		ACROSTIC	2/18, 19, 20, 21, 22, 23.	24.25
(Mr,Miss,Mrs.)	Last		(2) 18. 19. 20. 21. 22. 23. Batch Middle	24.25
(Mr,Miss,Mrs.) Month	Last Day Year	ACROSTIC First	BAtch	24.25
<u> </u>		ACROSTIC First	BA+ch Minute 34 a.m. 33 : 34 35 21 p.m.	
Month 4. Date: 26.27 6. Type of visit: I	Day Year 28,29 19 30,31 3 SU-2 図 SU-4 ⑤ MA	ACROSTIC First 5. Time arrived: 3_{2} A-4 \square MB-8	BA+ch Minute 34 a.m. 33 : 34 35 21 p.m.	oordinating Center
4. Date: 2(2, 27) 6. Type of visit: 1	Day Year 28,29,19,30,31 SU-2 ☑ SU-4 ☑ MA Step-Down ☑ Individ	First 5. Time arrived: 32 4-4 Ø MB-8 dualized Schedule	BA+ch Minute 13 a.m. 33 : 34,35 ₺ p.m.	coordinating Center
4. Date: 2(2, 27) 6. Type of visit: 1	Day Year 28,29,19 30,31 3 SU-2 図 SU-4 ⑤ MA 2 Step-Down ⑦ Individ 3 Unscheduled visit 図 MC	First 5. Time arrived: 32 A-4	Minute Middle Minute M	oordinating Center y No. this visit 39.40.4/
4. Date: 26.27 6. Type of visit: 1 V ₂ only 8 3	Day Year 28.29 19 30.31 SU-2 図 SU-4 図 MA Step-Down 図 Individ Unscheduled visit 図 MC Month	First 5. Time arrived: 32 4-4 Ø MB-8 dualized Schedule	BA+ch Minute 11 a.m. 33: 34, 35 2 p.m. V ₂ ON/Y 8. Year-Da	y No. this visit 942,43,44
4. Date: 2(2, 27) 6. Type of visit: 1	Day Year 28.29 19 30.31 SU-2 図 SU-4 図 MA Step-Down 図 Individ Unscheduled visit 図 MC Month	First 5. Time arrived: 32 A-4	BA+ch Minute 11 a.m. 33: 34, 35 2 p.m. V ₂ ON/Y 8. Year-Da	oordinating Center y No. this visit 39.40.4/
Month 2.6.27 6. Type of visit: [I V ₂ only [8] [2 38 [3] 7. Date of next Four-I	Day Year 28.29 19 30.31 SU-2 2 SU-4 5 MA Step-Down 7 Individed Wisit 6 MC Month Month Visit:	First 5. Time arrived: MB-8 dualized Schedule 10 Day Year	BA+ch Minute 11 a.m. 33: 34, 35 2 p.m. V ₂ ON/Y 8. Year-Da	y No. this visit 942,43,44 noce last visit
Month 4. Date: 2(e, 27) 6. Type of visit: 1 V ₂ only 8 2 7. Date of next Four-I	Day Year 28,29,19 30,31 SU-2 Ø SU-4 ⑤ MA Step-Down Ø Individ Unscheduled visit Ø MC Month Month Visit:	First 5. Time arrived: 32 A-4	BA+ch Minute 11 a.m. 33: 34, 35 2 p.m. V ₂ ON/Y Near-Da Days sin	oordinating Center y No. this visit 939 40 4/ y No. last visit 942,43,44 nce last visit
Month 4. Date: 2(2,27) 6. Type of visit: 1 V ₂ only 8 2 7. Date of next Four-I COMPLE 9. Review of comp	Day Year 28,29,19 30,31 SU-2 Ø SU-4 ⑤ MA Step-Down Ø Individ Unscheduled visit Ø MC Month Month Visit:	First 5. Time arrived: MB-8 dualized Schedule Day / Year W AT TERMINATION OF tem on each page is completit schedule is: SU-2	Minute 11 a.m. 3 3 3 3 3 5 5 p.m. C	y No. this visit 42,43,44 nce last visit LEAVES Im Number are correct.
Month 4. Date: 26.27 6. Type of visit: 1 V ₂ only 3 2 7. Date of next Four-I COMPLE 9. Review of comp 10. Appointment sli	Day Year 28.29 19 30.31 SU-2 Z SU-4 S MA Step-Down Z Individ Unscheduled visit Z MC Month Month Visit: TE THE SECTION BELOW pleted HPO6 done, Every in given: Next Clinic Revision	First 5. Time arrived: 4.4	Minute 11 a.m. Nour 5 Minute 11 a.m. 33 : 34, 35 D p.m. V ₂ only 8. Year-Day Year-Days sin VISIT BEFORE PARTICIPANT are and legible. Name and Program	y No. this visit 42,43,44 nce last visit LEAVES Im Number are correct.
Month 4. Date: 26.27 6. Type of visit: 1 V ₂ only 3 2 7. Date of next Four-I COMPLE 9. Review of comp 10. Appointment sli	Day Year 28.29.19.30.31 SU-2 SU-4 MA Step-Down Individed wisit MA Month Wonth Visit: TE THE SECTION BELOW	First 5. Time arrived: 32 A-4	Minute 13 a.m. 33 34 35 2 p.m. C	y No. this visit 42,43,44 nce last visit LEAVES Im Number are correct.
Month 4. Date: 2(e,27) 6. Type of visit: 1 V ₂ pnly 3 2 7. Date of next Four-F COMPLE 9. Review of comp 10. Appointment sli 11. Antihypertensiv	Day Year 28.29 19 30.31 SU-2 Z SU-4 S MA Step-Down Z Individ Unscheduled visit Z MC Month Month Visit: TE THE SECTION BELOW pleted HPO6 done, Every in given: Next Clinic Revision	First 5. Time arrived: A-4 MB-8 dualized Schedule - 16 Day / Year W AT TERMINATION OF tem on each page is comple sit schedule is: SU-2 Step-Do none Indiv. S Year (12) Hour (13)	Minute 13 a.m. 33 34 35 2 p.m. C	y No. this visit 42,43,44 nce last visit LEAVES Im Number are correct.
Month 4. Date: 2(e,27) 6. Type of visit: 1 V ₂ pnly 3 2 7. Date of next Four-F COMPLE 9. Review of comp 10. Appointment sli 11. Antihypertensiv	Day Year 28,29 19 30,3 SU-2 SU-4 SI MA Step-Down To Individe Unscheduled visit March Month Month Visit: TE THE SECTION BELOW Dieted HPO6 done, Every in price Expression Every in price Day Month Day Every Month Day Every Every Every Month Day Every Every Every Every Every Month Day Every Every	First 5. Time arrived: A-4 MB-8 dualized Schedule - 16 Day / Year W AT TERMINATION OF tem on each page is comple sit schedule is: SU-2 Step-Do none Indiv. S Year (12) Hour (13)	Minute 13 a.m. Nour 5 Minute 13 a.m. Nour 6 Minute 13 a.m. Nour 6 Minute 13 a.m. Nour 7 Minute 13 a.m. Nour 7 Minute 14 5 5 a.m.	y No. this visit 939,40,41 y No. last visit 942,43,44 nce last visit LEAVES Im Number are correct. 3-8
Month 4. Date: 2(e,27) 6. Type of visit: 1 V ₂ only 3 8 3 7. Date of next Four-F COMPLE 9. Review of comp 10. Appointment sli 11. Antihypertensiv prescribed).	Day Year 28.29 19 30.31 SU-2 SU-4 S MA Step-Down Month Unscheduled visit Month Month Visit: TE THE SECTION BELOV pleted HPO6 done, Every in ip given: Next Clinic Revisite medication received (or in the sit: Month Day 1	First 5. Time arrived: 32 A-4 MB-8 dualized Schedule - 16 Day / Year W AT TERMINATION OF tem on each page is comple it schedule is: SU-2 Step-Do none Indiv. S Year A-4 Mour (13) 9 49 50 5 52 :	Minute 13 a.m. Nour 5 Minute 13 a.m. Nour 6 Nour 13 a.m. Nour 6 Nour 13 a.m. Nour 7 Nour 13 a.m. Nour 14 a.m. Nour 14 a.m. Nour 15 a.m.	y No. this visit 939 40 41 y No. last visit 942 43 44 nce last visit LEAVES Im Number are correct. 3-8
Month 4. Date: 2(e,27) 6. Type of visit: 1 V ₂ only 3 8 3 7. Date of next Four-F COMPLE 9. Review of comp 10. Appointment sli 11. Antihypertensiv prescribed).	Day Year 28.29 19 30.31 SU-2 SU-4 S MA Step-Down Month Unscheduled visit Month Month Visit: TE THE SECTION BELOV pleted HPO6 done, Every in ip given: Next Clinic Revisite medication received (or in the sit: Month Day 1	First 5. Time arrived: 32 A-4 MB-8 dualized Schedule - 16 Day / Year W AT TERMINATION OF tem on each page is comple it schedule is: SU-2 Step-Do none Indiv. S Year A-7 Minute T	Minute 13 a.m. 33 34 35 20 p.m. C	y No. this visit 939 40 41 y No. last visit 942 43 44 nce last visit LEAVES Im Number are correct. 3-8
Month 4. Date: 2(e,27) 6. Type of visit: 1 V ₂ only 8 2 7. Date of next Four-I COMPLE 9. Review of comp 10. Appointment sli 11. Antihypertensiv prescribed). 12. Date of next visit	Day Year 28.29 19 30.31 SU-2 SU-4 MA Step-Down Individed Month Wonth Visit: TE THE SECTION BELOW Detected HPO6 done, Every in in given: Next Clinic Revisite medication received (or in the second month) Month Day 15 Hour 16	First 5. Time arrived: A-4 MB-8 dualized Schedule - 16 Day / Year W AT TERMINATION OF tem on each page is completit schedule is: SU-2 Step-Donone Indiv. S Year Year Year H 32 H 33 W AT TERMINATION OF tem on each page is completit schedule is: SU-2 Indiv. S Year 12 Hour 13 9 Minute 17 40	Minute 13 a.m. 33 34 35 20 p.m. C	No. this visit 39 40 4/1 by No. last visit LEAVES Man Number are correct.

20. MEDICATION RECORD		ولا Yes, all	Yes, some	None	Not applicable	e /2 CN14
Did the participant bring his medic	eations to the Clinic at th	~ / ·	2 / /	3 / */	1	// .
Medication PRESCRIPTIONS AND USAGE	1, chlorthelidens	2. Reservine d. Restorat	strydops . Hydralains	Suggestiding 192	212) Only
a.No. pills given last visit (2) 65 none (from last HPO6, Item 34k)	2 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	. (40) (44) . [5]	57 58 74 75 76	(5) (12) (12) (14) (14) (14) (14) (14) (14) (14) (14	15,716 34,35,736	4
b.No. pills given in interval since last visit (if any)		107 123124125 41, 14214 2 5	9 60 6 172 178 179	97198 99 217	18 219 37 38 339	•
c.No. pills returned this visit	24) 30 30 36 36 36 12 73, 74 90 71, 92 02, 69,	48)	4) (C) (8) (8) (8)	(1) (14) (14) (15) (15) (15) (15) (15) (15) (15) (15	272 (81) 272 (81)	5
d.Pills taken (= a + b - c)	25) 76, 77 93, 94, 95 111, 12	13 29 30 3 147 48496	5) 16 16 71 831 841 185	(8) 75) 75) 75) 75) 75) 75) 75) 75) 75) 75	۲ _{۷۱} ۲۶ کی و در او در ا	+
LAST VISIT PRESCRIPTION						> 2
e. No. pills per day (from last HPO6 Item 34j)	26 39 38 14 115	(4) (5) (5) (5) (6)	62 (62) (82) (83) (83) (83)	69 76 76 76 76 76 76 76 76 76 76 76 76 76	33 247. ³⁴⁸	← 3
f.No. days since last visit (from page 1 this form, Item 8)						
g.Total pills to be taken (= e x f) (Round off to whole number)	37 3 19,00,00 17,18	(19 35 36 37 53 54 5 517	(3) 1 ¹ 72, 1 ¹ 73 ¹⁸ 9, 1 ⁹ 0, 1 ⁹ 1	70 29, 21, 229, 2	31 Rug 350 251	<i>•</i> /
h.Adherence Index (= d/g x 100) (Round off to whole number)						
No medical problems Minor medical problems Major medical problems Now I would like to review with y and how often you take it?	. only → Comment: ou the medicines you are	taking. Would you ple	ease list for me (each medicine	e you are now	taking
<u> </u>	Medication:		Times/day			
253 254						
FOR PARTICIPANTS FOR WHOM			LAST VISIT-	SKIP TO	26	
23. Are you having any problems takin No Yes 87 ☑ □ → Exp 2.55		you at your last visit?	**************************************			
24 INTERVIEWED, DID BARTIOIDA	NT DOING ALL MEDIC				· · · · · · · · · · · · · · · · · · ·	
24. INTERVIEWER: DID PARTICIPA No Yes		INES TO THE CLINIC	C (SEE ITEM 20))?		
ASK: Thinking only of the No	e medicines we gave you a Yes	at your last visit, have	you run out of	any of them?	•	
(89) 2 257	□> Which	ones?		~ ~		

REV 11/12/73

I would like to ask several questions about your general health since your last visit. Since your last visit, have you been troubled with Yes, new or Yes, Yes, new or Yes, ☐ Ask if on any BP medicine, DK No DK unchanged increasing No unchanged increasing 3 [4] If on methyldopa, ask, 90) 258 iredness or fatigue? 包 (B) 🗆 273 excessive dry mouth? • skin rash or bruising? **259** • excessive drowsiness? V2 $\bar{\Box}$ રિટો□ ૨७० **D274** • faintness or lightheaded-• nausea or vomiting? **1275** ness when you stand up **1276** waking up too early and quickly? having difficulty getting ☐ If on chlorthalidone* or back to sleep? any thiazide, ask, (69) 🛮 277 • feeling so depressed (sad • increasing weakness? M261 П or blue) that it interfered • a recent blurring of your 262 with your work, recreation vision? or sleep? T 263 excessive thirst? • severe pain in any joint? 1 264 If on hydralazine, ask, ☐ If on spironolactone, ask, heart beating fast or skip (110) 🗖 278 (97) 🛮 २५5 (males only) swelling or ping beats? episodes of chest pain or V? tenderness of your breasts? heaviness in the chest? ☐ If on reserpine*, ask, • severe headaches that were (12) ****** 280 • recurrent stomach pains? 1264 so bad that you had to stop • black or tarry stools? • blood in the stools? what you were doing? (VO) [] 268 • nightmares? Vz onl4 ☐ If on guanethidine, ask, 1269 • faintness or dizziness when (1/3) · waking up too early and 07 🗖 (104) having difficulty getting arising in the morning, or on back to sleep? hot days, or after exercise? • feeling so depressed (sad (103) 🔲 271 blacking out or losing or blue) that it interfered consciousness? with your work, recreation • persistent diarrhea? Vzonly or sleep? • stuffy nose? **11313** Vz only *alone or as a constituent of Regroton 26, FOR MALES → SKIP TO 27 IS PARTICIPANT POSTMENOPAUSAL? (116)284 No → SKIP TO 27 卫 ASK: Have you had a menstrual period within the past six weeks? Yes What is the reason? Hvsterectomv SKIP TO 27 ☑ Known pregnancy 2 Possible pregnancy. Order pregnancy test at this visit. ☑ Other, specify: Yes Are you currently taking birth control pills? →Discuss at this visit, if appropriate. 27. Since your last visit, were you unable to perform your usual activities because of sickness or disability? No → How many days?

25. Check box in upper left hand corner of block if on medication in question. Comments on significant positive responses should be

recorded in section on review of participant's status, below (Item 31).

(122) Yes N	0					
291 🖫]	→ SKIP TO	29			
Describe:						
	ı	1		1		
Doctor	Date seen	Illne	SS	Treatment	Re	sult
29. Have you had to stay ov	ernight in a hospital sii 'es	nce your la	est visit?			
	2			2 ₀ 2₀	(124)	
((ow many different tim Complete Notification (ifferent visit.)				1 (21)	
30. Were medications discon	tinued or reduced since	last visit o	r at this visit because of	f side effects?		
(25) Yes P	No □>SKIP TO 3	31				
<u>Medication</u>		Discontinu	ued	Reduced	Reason	1
	By:	HDFP	Other H	DFP Other	\sim	
	, 297 0,0		2		298	}
2. (28) 299	, 300				129) 301	
3. (130) 302	,303				(131) 304	V2 Only
4. (32) 305	5,306				(33) 307	
5. (34) 30°	8.309		□ No You		(35) 310	
Was other ther	apy required for possib	ole side effe	No Yes ects? ☐ ☐-		(36) 311	
31. Review of Participant's S	Status (including expan	sion of ans	wers to preceding ques	tions, and other	pertinent hist	cory or physical findings):
32. On the basis of all information	mation available at this No	time, does	participant have: Yes			
a. A new indicatior Special Test?		312		pecial Tests form		
b.A new condition	requiring notification	of non-fatal		farction, stroke, o	or hospitalizat	ion)?
	No □	(38)	Yes Notifie	estion of Non Fo	tal F	00\ !=!s!-s!
	u	3i3		cation of Non-Fat Yes	tai Event (FIP	O8) initiated.
c. A new condition	suggesting a critical tox contraindications, or in	ic reaction?	314 (39)	□> Toxic		eport (HPO9) initiated.
d. A change in drug require initiation		i hiecanrioi	is willer justily all EXC	option to the bus		
icquiic iiiitiativii	No	(4 <i>0</i>)	Yes			
		315	_	w of Drugs and Ex		he Basic Plan of
DEV 44/49/79			Thera	py (HP13) initiate	ed.	HPO6/4

28. Have you seen any doctors because of illness since your last visit?

33. Is participant at or below goal blood pressure? No Yes SKIP TO 34 Is participant being advanced in dosage or to next Treatment Step? No Yes 317											
		/ 5ge /	/ ogge					/ &	//	/ /	/ /
34. Prescription This Visit:		Supering Sup	indiana de la constitución de la	A. Septime	region S.	Retritors 6.	Andra atime	Josephilitico 90.		139/	455 +56
a.No. pills returned this visit (20 c. above)											
b.Stop						 					
c.Continue same dose											1
d.Increase dose	® 325	157) 34.1	(G) 35.3	(b) 368	113) 380	(78) 392	(84) 40.7	91) 423	198) 440	20 3 457	(This ROW V2 ON14)
e.heduce dose											
f.Start (HP13 required)											
g.Pill size (mg/pill)	(51) 32/ ₆ 32/328	2.5	(63) (13, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3	X	250	179) 393, ³⁹ 4, ³ 9,	185) 40, 409	(92) 12, 12, 12,	199)	206	1
h.No. pills/dose	(5) 329.330.331	[58] 34 ₂ ³ 4 ₃ ³ 4 ₄	(64) 357 358 359	69 369 370 371	(74) 381, 382, 383	180) 376, 397, 38	186) 410, 41, 419	93)	(200) (4) (4) (4)	200) 46 462	1
i.No. doses/day	[5] [3] ₂ • ³ 33	(159)	65)	(70) ³ 72 ³ 73	175) 384 • 385	(181)	187) 413 414	194) 430 43	201) 440	209 464 465	†
j.No. pills/day= (h x i)	[54] 334_335_33/	160) 347, 348, 349	166) 362, 363,364	171) 374, 375, 37	176) 386 347, 388	182)	188 4, 41,	195) 43 ₂ ,43 ₂ ,4 ₃	1449 450 45,	209 467.468	This ROW
k.No. pills given at this visit (including a. above)	(23)	(6) 350, 35, 35,	(67) 365 366 367	17) 37 ₇ , 37 ₈ 379	179) 389 ³ 9 ₀ ³ 91	183) 404 105 406	189) 118,419,420	196) 43, 43, 43,	263) 452,453,454	210 47 47	V2 ONIY)
(1) I Participant is on pote 472 V2 ONly	ıssium:	Dose (Q)	_473	. 474	□ K 475€	(CI 10% (V ₂ on i	4) (1,00	Other p	preparation	This coll v. onl y, specify:	υ.nω) Ψ
Other medicines than		-	~	77. 478							
35. Remarks on further mana	gement piai دورد ا	ns, alagno	stic evalua	tion or ot	ner matte	rs:	7				
	<u> </u>				<u> </u>		ר				
(321)	∟ (<u>5</u> 8				Ć	524) [,	Alpha			
(323)				Me	edicati	on code			0)		

36. Whe next Clinic Revis		olic ≥ 105 n	nm Ha					
(2)(3)				V ₂ 0.	NIY			
☑ Step-Up Schedule (4 weeks) Diastolic ≤ 104 mm Hg								
☑ Maintenance Scho	edule B (8 weeks)						
図 Step-Down Sched	lule (specify inte	rval: 4	480 (21' weeks)	7)				
<pre>Individualized Sc</pre> Maintenance	Schedule C	481	0 0 days) (218)				
37. Since the last visit, or consultation concernic) participant (received					
		YES		NO				
	By M.D.	By Ther.	By H.C.					
drug adherence?	Q19 0483 (229 🗆 484	(221) 1485	2230484				
cigarette smoking?	1 -	Z24) □488	23 0 489	229049a				
diet?	@ □ 491 (228 492	29 493	23 9 □494				
weight?	23) □495	33) 🗆 496	(233) 497	234 498				
38. Physician						99 499	500 (235)	
						49		
Therapist						0 501	502 2?	
Health Counselor						19 503	504 (237)	
(3 9) Version		(3	326) 662	FILLE	re R			
			327) 663 (328) 66	g FIME	R			
			(329) 6	65 FIL	LER			
			psa	\6\C#	LEUT DE			

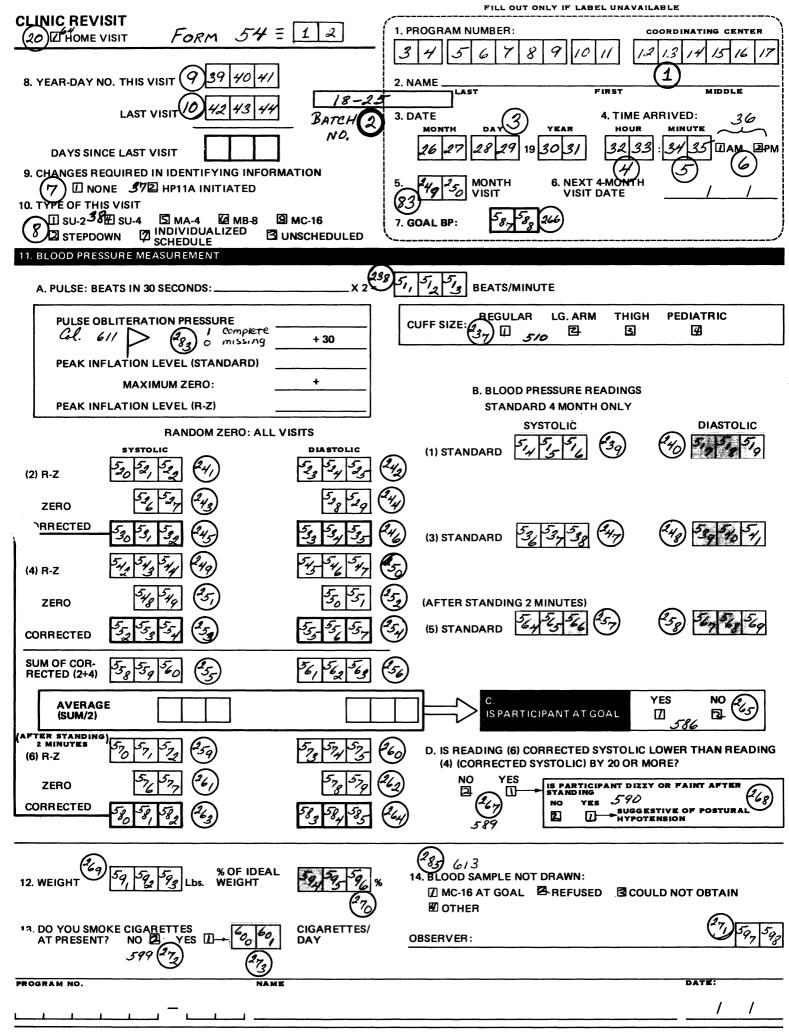
4. Blood Pressure Measurem a. Pulse: Beats in 30 se		x 2 =	15. 5. 5.	ninute.	
will be taking six blo	od pressure r	eadings, four of them v	while you are seated and	two of them just after you	stand up.
b. Blood pressure reading	s:	Systolic Systolic		Diastolic (5th phase	o)
1.(Std)		(239) 5 ₀₈ , 5 ₀₉ , 5 ₁₀		5 5 5 13	
2.(R-Z)			(241) 514 515 516		(242)5,75i8519
	Zero		(243) 520.521		(244) 522 523
	Corrected		645 52 52		52, 52, 52
- 4- ··		(247) 5 ₃ , 5 ₃ , 5 ₃	9. 5. 6	248 53 534 535	7. 8. 9
3.(Std)		30.31.32	(249)53/1, 53, 53°	3.4.3	(250) 539 540 541
4.(R-Z)	7		(25) 5_{42} 5_{43}		54,1 545
	Zero		5 5, 5,		5 5 5 T
	Corrected		253 46. 77. 48		239 49. 30. 51
	SUM of Cor	rected Readings 2 & 4	85) \(\frac{5}{2}, \frac{5}{2}, \frac{5}{4} \)		55. 55. 55 ₇
	Average of	R-Z Readings=SUM			
	of Corrected				
5.(Std) after 2 minutes	standing	257 55 ₈ 559.54		(258) [5/6, 5/6, 5/63]	
6.(R-Z) after 2 minutes	standing		259)544.565.546		260 569 568 569
	Zero		(24) $\frac{570.571}{243}$ $\frac{57.57.57}{2}$		(264) 572, 573
c. Is Average RZ Diastol	Corrected	Goal BP?	No Yes	(Goal: 58, 58)	or below)
d. Is Reading 6 (correcte		580	D Vzonly 1		
No Yes	1	_		e. Nemark	•
593 0 -		the participant dizzy o	r faint after standing? Yes		
269 Pounds	_	⁽⁶⁸⁾ 5		f postural hypotension.	
5. Weight 85.86.87	5	(270) 15. E E	1		(27) 5 ₀ 5 ₀
Percent of ideal weight:	(From standa		Observer:		9, 12
6. Do you smoke cigarettes	53	1.3		s do you usually smoke per	4.75
7. Review of symptoms (che 594 (274) III Dyspnea	40	Chest pain		Change in sexual	U6.
597 (275)	(4C	(279) U Intermitten		ability, describe:	increase
5 99(277) _ [] Ankle edema		Deea (280) □ Weakness O (281) □ Numbness O		(283)	2 decrease ○ S
DI Alikie BOKIII	61) 	, parocarona		
o ()	V ₂	only-		Other, describe:	
8. (285) Blood sample	urawn for 4		clated)(except for) ORMATION (complete a	MC-16 participants)	
			The state of the s		Day Year
1. Program Number:		<u></u>	J	3. Date	19
2. Name: (PRINT IN BLO	JK CAPITALS	S)			
(Mr.,Miss,Mrs.)	Last	F	irst	Middle	

REV 11/12/73

HPO6/A

HP06

Version 3



START INTERVIEW HERE	COMMENTS
15. How have you been feeling since your last visit? NO PROBLEMS D PROBLEMS D 85	
16. Have you seen or talked with any doctors or nurses for health related reasons since your last visit? NO (Skip to question 18) YES (22)	
17. Have you had to stay overnight in a hospital since your last visit? 294 NO ② YES ① admitted to the hospital? (NOTE: Fill out HPO8 for each admittance)	
18) Have you had a period in the past 6 weeks? 287 + NA (Postmenopausal, etc.) YES NO 2	
NOTE! If pregnancy possible DO PREGNANCY TEST If not, explain	
19. Now I would like to review with you the medicines you are taking, including medicines not prescribed by us. Would you please list for me each medicine you are now taking and how often you take it?	
(Be sure to ask about birth control pills if appropriate)	
MEDICINE OR DESCRIPTION	AMOUNT TIMES/DAY
256 > 1/82	
	
	
IF NOT ON HDFP MEDICINES, SKIP TO 22	
20. Are you having any problems taking the medicine	
we gave you at the last visit? NO A YES II 67	
(Comment on any compliance problems or situations	
preventing the participant from following the prescribed drug regime)	
21. (If failed to bring medicines to clinic)	
Thinking only of the medicines we gave you at the last visit, have you run out of any of them? NO YES 1	
IF YES, EXPLAIN WHICH ONES	

22. CHECK BOX IF ON MEDICINE IN QUESTION	COMMENTS If possible adverse reactions lead to drug discontinuation, change in drug contraindictions
I would like to ask several questions about your general health	or precautions, or an exception to the basic plan of therapy, complete an HP22.
since your last visit. Since your last visit have you been troubled by:	A CONTRACTOR OF THE CONTRACTOR
Since your last visit have you been troubled by.	
☐ Ask if on any blood pressure medicine 2	
• Tiredness or fatigue 90 NO YES 1	
• Skin rash or bruising • Faintness or lightheadedness	
• Faintness or lightheadedness when you stand up quickly	#14 (Co. 1) - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
☐ If on Chlorthalidone or any Thiazide ask	
(Alone or in combination, e.g., Regroton) • Increasing weakness (93) NO (93) NO (93) (93)	
• A recent blurring of your vision (94) NO TO YES	
• Excessive thirst (95)NO (25)YES (
• Severe pain in any joint • Muscle cramps • Muscle cramps	
Muscle cramps Heart beating fast or skipping beats	
☐ If on Spironolactone, ask • Swelling or tenderness of your breasts NO ☐ YES ☐	
_	
If on Reserpine ask (Alone or in combination e.g., Regroton)	
 Recurrent stomach pains Black or tarry stools (9g) NO □ YES □ NO □ YES □ NO □ YES □	Street All Street And
Black or tarry stools Blood in the stools	
• Nightmares No D ² /Y ES D	
Waking up too early and having difficulty getting back to sleep ONO ONO YES ONO ONO YES ONO ONO ONO ONO ONO ONO ONO O	
difficulty getting back to sleep ✓ NO L YES L • Feeling so depressed (sad or blue)	
recreation or sleep • Stuffy nose	The control of the co
• Stuffy nose	
☐ If on Methyldopa, ask	
• Excessive dry mouth	
• Nausea or vomiting	PRODUCTION OF THE PRODUCTION O
• Waking up too early and having. (10g)NO 1278YES 1	
difficulty getting back to sleep • Feeling so depressed (sad or blue) • Feeling so depressed (sad or blue)	
that it interfered with your work,	
recreation or sleep	
☐ If on Hydralazine, ask	
● Heart beating fast or skipping VO □ YES □	
beats ● Episodes of chest pain or	
heavinesss in chest	
Severe headaches, that were	
so bad you had to stop what you were doing 282 YENO YES	
If on Guanethidine, ask	
• Faintness or dizziness when	
arising, on hot days or after	
exercise • Blacking out or losing • Blacking out or losing	Management of the Control of the Con
consciousness	
• Persistent diarrhea	

(4 MONTH VISIT ONLY)	II.	COMMENTS	
23. Review of symptoms. Expand positives.			
Has participant experienced:	A 100-		
a. Dyspnea YES II	· 11		
b. Orthopnea			
c. Paroxysmal nocturnal dyspnea	1		
d. Ankle edema (77) NO DOGYES	I		
e. Chest pain or heaviness	1		
f. Intermittent claudication (79) NO 1607YES	1		
g. Weakness or paralysis	ı		
h. Numbness or paresthesia			
i. Change in sexual ability			
j. Other 8 NO 16/2 YES			
3			
24. Since last visit or at this visit:	ŀ		
a. Has there been a new event of any			
of the following:			
(1) New Gout 492 NO 2 YES (1/2,) SUSPECT	II.		
(2) New diabetes (22) NO YES SUSPECT			
(3) Hemolytic anemia NO 🗆 YES 🗆 3 SUSPECT		a company of contract the contract of the cont	
(4) Asthma 494(22)NO - YES - SUSPECT			
b. Was any drug discontinued because of a suspected side effect	ı)		
Or for any other reason?	COMPLETE HP22	and the second s	Access A service with a service which the work is
Of for any other reason:	' '		
c. Have there been other side	Para de la companya della companya della companya della companya de la companya della companya d	the second of th	
effects which have caused			
reductions of medicines?	rance and a second		
YES 🛮 😥 NO 🗷			
497			
SIDE EFFECT	CC CODE	SUSPECTED MEDICATION	C CODE
	(28c) 12 12		(70)
1	(6) (6) (6) (7)		(8) 3/3/3/
1	(20 14 6/3-		(3) (3) (3)
1	(87) (6/7)		2010 160
2.	(187) [1/4] [6/7] (288) [7/2] [7/4]		215 792 724
	(87) [1/6 [6/7] (283) [1/8 [6/7]		8 43, 43, (0,1) 460 400 (15) 493 424
2.	(187) [1/4]		8 43, 43, 20, 460 W
3	(187) (1617) (283) (13619)		8
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic			8
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic			(25) 793 724
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic			(2) 433 424
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic			8 3, 3, 3, Conf 160 17 18 18 18 18 18 18 18 18 18 18 18 18 18
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit:			8 3, 3, 3, 4, 4, 5, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6,
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a	COMPLETE HP22		8 3, 3, 3, 4, 5, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6,
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 27. NO	COMPLETE HP22		8 3, 3, 3, 4, 4 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/4/ NO ② YES □ 3/4/ Sustained BP ≥ 115 at Step 2 or beyond with	COMPLETE HP22		8 3, 3, 3, 4, 4 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations	COMPLETE HP22		8 3, 3, 4, 4 Co. 7 793 124
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/4/ NO ② YES ① Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 29 ② 2 K+'s < 3.5 off diuretics for > 1 week	COMPLETE HP22		8 3, 3, 4, 4 (0) 160 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/4/ 8 Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 27	COMPLETE HP22		(0) (10) (10) (10) (10) (10) (10) (10) (
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/4/ Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 2 K+'s < 3.5 off diuretics for > 1 week Sustained BP ≥ 115 at Step 2 or beyond 3050 and retinal hemorrhages or	COMPLETE HP22		(0) (2) (3) (2) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 26. Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations and retinal hemorrhages or papilledema	COMPLETE HP22		8 3, 3, 3, 4, 4 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 26. 27. NO ② YES ① YES ② 28. Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 29. Sustained BP ≥ 115 at Step 2 or beyond 30. 30. 30. 30. 31. YES ② 30. 30. 30. 30. 30. 30. 30. 30	COMPLETE HP22		8 3, 3, 3, 4, 4 (c)
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? Sustained BP ≥ 115 at Step 2 or beyond with representations and palpatations at the sustained BP ≥ 115 at Step 2 or beyond with representations and palpatations and palpatations and retinal hemorrhages or representations representations and retinal hemorrhages or representations representations representations representations and retinal hemorrhages or representations represe	COMPLETE HP22		8 3, 3, 4, 4 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/H Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 2 K+'s < 3.5 off diuretics for > 1 week Sustained BP ≥ 115 at Step 2 or beyond and retinal hemorrhages or papilledema Decreasing hematocrit and/or hemolysis 3/H Jaundice, SGOT > 70, or hepatomegaly	COMPLETE HP22		8 3, 3, 4, 1
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/4/ Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 2 K+'s < 3.5 off diuretics for > 1 week Sustained BP ≥ 115 at Step 2 or beyond sind retinal hemorrhages or papilledema 23/2/ Decreasing hematocrit and/or hemolysis 30/3/ Jaundice, SGOT > 70, or hepatomegaly LE symptoms or signs on hydralazine	COMPLETE HP22		8 3 3 Co 4 6 7 Co 5 793 74
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/H Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 2 K+'s < 3.5 off diuretics for > 1 week Sustained BP ≥ 115 at Step 2 or beyond sind retinal hemorrhages or and retinal hemorrhages or papilledema Decreasing hematocrit and/or hemolysis on methyldopa Jundice, SGOT > 70, or hepatomegaly LE symptoms or signs on hydralazine 3/50	COMPLETE HP22 COMPLETE HP 10		(0) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? Sustained BP ≥ 115 at Step 2 or beyond with representations and palpatations of the same and palpatations o	COMPLETE HP22 COMPLETE HP 10		
d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3. Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 2. Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 2. Sustained BP ≥ 115 at Step 2 or beyond and retinal hemorrhages or and retinal hemorrhages or papilledema 3. Decreasing hematocrit and/or hemolysis on methyldopa 3. Decreasing hematocrit and/or hemolysis on methyldopa 3. Decreasing hematocrit and/or hemolysis on methyldopa 3. Decreasing hematocrit and/or hemolysis on hydralazine	COMPLETE HP22 COMPLETE HP 10		
d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? Sustained BP ≥ 115 at Step 2 or beyond with attacks of headache, sweating and palpatations 2 K+'s < 3.5 off diuretics for > 1 week Sustained BP ≥ 115 at Step 2 or beyond and retinal hemorrhages or and retinal hemorrhages or papilledema Decreasing hematocrit and/or hemolysis on methyldopa LE symptoms or signs on hydralazine 1 Is there a new now-fatal event? 3 NO ■ YES ■ Hospitalization Hospitalization	COMPLETE HP22 COMPLETE HP 10		
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/H/ NO ② YES ① 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3/H/ NO ② YES ② 3/H/ NO ② YES ② 3/H/ NO ② YES ② 3/H/ Sustained BP ≥ 115 at Step 2 or beyond with sustained BP ≥ 115 at Step 2 or beyond and retinal hemorrhages or and retinal hemorrhages or sustained BP ≥ 115 at Step 2 or beyond and retinal hemorrhages or papilledema 3/H/ 3/D Decreasing hematocrit and/or hemolysis con methyldopa 3/D Jaundice, SGOT > 70, or hepatomegaly 3/D LE symptoms or signs on hydralazine 3/S H Hospitalization The MT (9) (29) Stroke 3/H Stroke 3/	COMPLETE HP22 COMPLETE HP 10		
d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? By Sustained BP ≥ 115 at Step 2 or beyond with yea attacks of headache, sweating and palpatations years and retinal hemorrhages or years	COMPLETE HP22 COMPLETE HP 10		
d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? 3	COMPLETE HP22 COMPLETE HP 10		
2. 3. d. Is there a change in drug contraindications or precautions, or an exception to the basic plan of therapy? 25. On the basis of all available information at this visit: a. Is there an indication for a special test? (a) (b) (c) (c) (d) (d) (e) (e) (e) (e) (f) (f) (f) (f	COMPLETE HP22 COMPLETE HP 10		

26. PRESCRIPTION LAST VISIT 65	79 1	1/2 □	(23)D	(Zg)	(3 ₃) [₹9 ₇ □	% ₽ 7	OTHER CC CC C C C C C C C C C C C C C C C C	OTHER CC	88) _158
NOT ON ANTI- HYPERTENSIVE (SKIP THIS ITEM	CHL R.	SPIRO.	RSERP.	RGROT.	METHYL.	HYDRA.	GUANE	NAME 64	NAME O 7/	POT. SUP.
NON-HDFP Prescription	238 📵	186	1 97	303 _□	30 9	6 9 8	649 ₀	653 [3/2]	658 [(3/6)	482 (214)
a. PILLS GIVEN Last visit	P2 66 68	88 24 86	34/00/04	10/20/20	1/6/2/10	52/2/58	59/2/2	(3)'23'23	(2 7 2 3 g	
ONE GIVEN	s41 □80	288 118	299 42	305 130	311 🗆 (34)	639 - 29,	650 4309		654 [(317)	
b. PILLS GIVEN Since last visit	P3 49 7/	29 87 89	क्रिश्न क	W 19319A	12/4/4	म्बुस्बर्	59/2/29	(66/9/30)	(13 Fig 72)	
c. PILLS RETURNED	23/24	90 92 30	108 10 36	12/3/12	44 46 48	62 64 54	18 1260	9,19,67	2 2 74	
Not all remaining pills returned	81 244	119 1289	127 300	131 306	135 312	299 40	310 1651	(3/4) 1 656	(318) 1 660	
d. PILLS TAKEN (a + b - c)	378	93 95 31	1/2/13/57	12/3/43	47 49 49	165 475	1831861	(4) (4)	खुरुख)	(84)
e. PILLS/DAY	79.80	97 98	15-16	(35-34	5,5	169 TO	187 98	2g • Eg	229.30	ভৌক্তান্ত
Pill size	(26)	(32)	(38)	(44)	(50)	(56)	(62)	(69)	(76)	MEq/DAY
f. DAYS SINCE)							
g. PILLS TO BE	8, 8, 27	99 10,33	1/2 1/0 39	3,3,45	43/55/57	17 13 57	180 9,63	18 (2) (2)	3/3(P7)	
h. ADHERENCE				العالمة						
INDEX (d/g x 100) Missed doses recently	82 247	120 1290	128 7200	132 308	136 1212	3071 (40	311) 1/57	(315) 1 657	(32) 1 504	
	<u> </u>					678	<u></u>	COORE		34 68 68,7
☐ Adherence index s	uspected inva	alid ∐	Poor compl	iance suspec	ted			CENTE	R COD E 327 (3)	<u> </u>
27. PRESCRIPTION THIS VISIT	(15)D	1582	164 2	1690	122P	180 400	186)415	OTHER CC	OTHER	21, 477
NOT ON ANTIXIZATION NOT ON ANTIXIZATION HYPERTENSIVE (2)	CHLOR.	SPIRO.	RSERP.	RGROT.	METHYL.	HYDRA.	GUANE.	(90)	NAME (97)	POT.SUP.
a. STOP (Complete HP22)		0	Ø	卬	Ø	[]	Ø	Ø	2	Ø
CONTINUE	2327	2	2	2	2	2	2	2	2	2
INCREASE	B(50		955 3 162	3705 168	382 3 73	394/3(78	4093 (84)	427 3 (19,)	445 🗵 (98)	4623205
REDUCE	₩ W	Ø	Ø		Ø	Ø	Ø	Ø	Ø	Ø
START (Complete HP22)	J	5	5	5	5	5	5	E	3	6
b. PILL SIZE (MG/Pill)	15, 12, 33	25	\$5,35	×	23 54 72	38 82 129	1/0 1/2 185	12 3d (g)	44 44 499	ℤ κ έμ
c. PILLS/DOSE			(63)							2/3
d. DOSES/DAY	(54)	(160)	(166)	(77)	(176)	(182)	(188)	(95)	(202)	moke to ONE Other
e. PILLS/DAY	37.33	300 5	E 3- E 6	370-32	9 39a	16g-18g	159-E2	19-13	15-15 ₂	13/2/2
f. PILLS GIVEN This Visit	15.3.8	ध्रिश्चर्द्ध	(c) 2, 2,	13 34 58	$\overline{}$	183 14 168	189 12, 123	(23, 14)	(8)15,14	MEq/DAY
NONE GIVEN	335-153	348 150	363 165	375 470		102 [181			453 🗆 (201)	4K5 1 206
NON-HDFP PRESCRIPTION	12							(194) 1 435	(208) 1 470	207 1468
4 PRESCRIPTION	<u>.</u>	I		1	I		<u> </u>			
								CANII	228 23 E	71 01 71 2
28. List all medicines, other	•••	oertensives, t	hat the parti	ccipant is cur		-			it and the next.	
	DICINE		G	20 2 6		SOUR OF	641	COMMENTS		
(1)			(32)		원 전 전	② (300)	(301) 642			
(2)				22) 120 120 12	57 D	30,2				
(3)			(328)	57 63 63 67 63 63			303)644			
(4)			و	24 67 67 6	26 D	\sim	6 45			
5)			(325)	-219131 	<u>اع</u>		(305)646			
(6)			(2	7	_	□ (30 <i>a</i>	\			
(7)				26) 48 4/4	<u> 각</u>	L (300	<u>, </u>			

