**BP GOALS**
- Treat adults with confirmed hypertension to a goal BP < 140/90 mm Hg.
- In adults with ASCVD, CKD, age ≥ 75 years, or 10-year ASCVD risk ≥ 10%, consider treating to a goal SBP < 130 mm Hg. (Exclude adults with eGFR<20 from this lower target.)

**ACE Inhibitor**² / **Thiazide Diuretic**
- Lisinopril / HCTZ (advanced as needed)
  - 20/25 mg X ½ daily
  - 20/25 mg X 1 daily
  - 20/25 mg X 2 daily
- Pregnancy potential: avoid ACE inhibitors²
  - If ACEI intolerant or pregnancy potential
    - Thiazide Diuretic²
      - HCTZ 25 mg ⇒ 50 mg OR
      - Chlorthalidone 12.5 mg ⇒ 25 mg
  - If not in control
    - Calcium Channel Blocker (CCB)
      - Add amlodipine 2.5 mg daily ⇒ 5 mg daily ⇒ 10 mg daily
        - If not in control
          - Spironolactone* - Aldosterone Receptor Antagonist (ARA)
            - Spironolactone 12.5 mg ⇒ 25 mg daily
              - *If on thiazide AND eGFR ≥ 60 mL/min/1.73 m² AND potassium < 4.5 mmol/L
              - If spironolactone eligibility criteria not met:
                - bisoprolol 2.5 mg ⇒ 5 mg daily ⇒ 10 mg daily
                  - Titrate to BP; maintain pulse of > 55

**For ACEI intolerance due to cough, use ARB²**
- Add Insartan 25 mg daily
  - ⇒ 50 mg daily ⇒ 100 mg daily
- Do not combine ACEI and ARB.
- Pregnancy potential: avoid ARBs³

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²Kaiser Permanente references.

³Consult provider for specific guidelines.

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For detailed information, consult the guidelines and references provided by Kaiser Permanente.