

1.– Inform pregnant patients or those planning to become pregnant about the potential fetal risks associated with valsartan use, emphasizing the importance of using effective contraception and notifying healthcare providers if pregnancy occurs. Safety Measures:– Advise patients to avoid potassium supplements or potassium-containing salt substitutes unless directed by a healthcare provider, due to the risk of hyperkalemia.– Monitor renal function tests (e.g., serum creatinine, blood urea nitrogen [BUN]) and electrolytes (especially potassium levels) periodically, as valsartan can affect kidney function and potassium levels. Assessment:– Obtain a complete health history including allergies, especially to drugs in the ARB class, and assess for conditions that may require caution, such as renal artery stenosis or renal impairment.– Advise patients to report any signs of angioedema, significant changes in urination, or symptoms that may indicate electrolyte imbalances (e.g., weakness, irregular heartbeat).– Watch for signs of hypotension, particularly in patients who are volume– or salt–depleted due to diuretic therapy, dietary salt restriction, diarrhea, or vomiting.– Coordinate with the healthcare team to adjust medications or implement additional interventions based on the patient's response to therapy and any side effects encountered. Consistency helps maintain blood pressure control. 2.3.4.5.