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Ambulatory Blood Pressure Monitoring

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RN-led Ambulatory Blood Pressure Monitoring

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Background

- HTN patients may be under/over-medicated based on in-clinic BP readings
- ABPM is supported in literature as the most accurate BP measurement

Purpose

- Improving the accuracy of blood pressure readings helps patients receive appropriate treatment

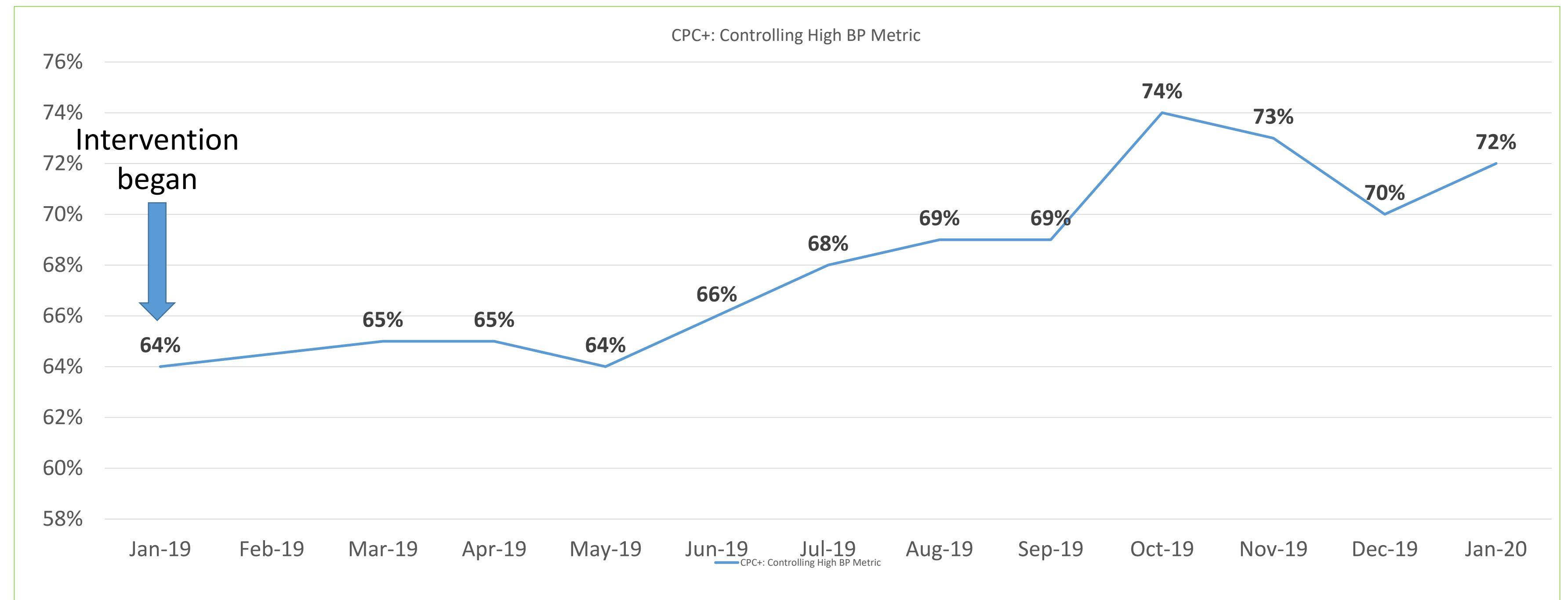
Goals

- Ensure patients receive adequate HTN treatment, decrease risk of sequelae
- Ensure providers have accurate data to plan treatment
- Provide patients with RN-led health coaching to address modifiable risks

Methods

- Provider refers patient to RN
- RN provides ABPM to the patient and educates about how to use the equipment
- PharmD reviews ABPM data & adjusts medications PRN
- RN discusses results with patient & reinforces lifestyle modification teaching
- Patient may also be referred to weekly hypertension clinic for ongoing co-management with RN & PharmD PRN

Tool: Ambulatory Blood Pressure Monitor (ABPM)



Discussion & Implications

- ABPM may reduce risk of MI, stroke & falls r/t under/over-treatment
- RNs promote lifestyle modification to minimize need for medication
- Intervention interdisciplinary with PharmD, further exploration needed for similar process with RN & PCP
- Further cost/benefit analysis warranted to determine if process should be spread or adopted standardly

Results

- Clinic metrics for BP in good control increased 6% over the course of this intervention.
- RNs now average 4 patients/week utilizing ABPM.
- Unknown impact of ABPM on other clinic workflows, such as in-clinic BP rechecks if patient was above goal or referrals to the clinic's HTN clinic

References

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Statistics: Providence Medical Group CPC Internal Reporting-Epic CPC +QM Dashboard PHS