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

 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