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Implementing a Plan of Care for Hypertension

Rebecca Hamlin
*Providence St. Joseph Health*

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Implementing a Plan of Care for Hypertension

Introduction
Providers routinely document what the next steps in treatment will be for patients who have elevated blood pressure during their office visit. In order for the plan to be implemented, the patient must return to see the provider again and often wait up to 6 months before they return. This results in potentially sustained uncontrolled blood pressure.

Why does it matter?
When left untreated, the damage that high blood pressure does to your circulatory system is a significant contributing factor to heart attack, stroke and other health threats (American Heart Association, 2017). Quantitatively, hypertension is the most important modifiable risk factor for premature cardiovascular disease, being more common than cigarette smoking, dyslipidemia, or diabetes, which are the other major risk factors (Basile & Bloch, 2019).

Method
Implementing a Plan of Care

AIM STATEMENT
RN put a patient’s (hypertension) plan of care in action without delay

PRIMARY DRIVERS
Plan of Care
Following RN visit scheduled

SECONDARY DRIVERS
RN has acceptance from providers to act
Share benefits and challenges of RN participation

Change Ideas
Develop dot phrase with specifics
Follow-up instructions in After Visit Summary

Conclusions
By having patients return sooner for RN visit to implement plan of care, patients achieve improved blood pressure control in a shorter amount of time. Secondary benefits include lower cost of care, improved access for providers, and patient engagement.

References: