



Act rapidly

Workflow

Managing patients with high blood pressure *without a diagnosis of hypertension*

- If this is the first encounter with high blood pressure (BP) readings for the patient, schedule a follow-up visit per practice protocol (typically within one to four weeks)
- If the patient has high BPs for two or more encounters, coordinate and provide education on out-of-office readings, which include self-measured blood pressure monitoring (SMBP) or 24-hour ambulatory blood pressure monitoring
- Interpret out-of-office readings to confirm diagnosis
 - If using SMBP, average the systolic and diastolic measurements to obtain a BP to guide treatment
- If patient has a diagnosis of sustained or masked hypertension, use treatment algorithm to guide treatment
- If treatment is nonpharmacological, follow up (including reassessment and revision of plan) should occur every three to six months until BP is controlled
- If treatment includes BP lowering medications, follow up (including reassessment and revision of plan) should occur every four weeks until BP is controlled

Managing patients with high blood pressure *with an existing diagnosis of hypertension*

- Use a treatment protocol to guide treatment
- If treatment is nonpharmacological, follow up (including reassessment and revision of plan) should occur every three to six months until blood pressure is controlled
- If treatment includes blood pressure lowering medications, follow up (including reassessment and revision of plan) should occur every four weeks until blood pressure is controlled
- Recommend patient perform SMBP monitoring the week before scheduled appointment and average the systolic and diastolic measurements to obtain a BP to guide treatment

Outreach

- Run a query to identify individuals with a diagnosis of hypertension whose last in-office blood pressure was high and did not receive follow up every eight weeks
 - If the patient is on BP lowering medications, follow up should occur every four weeks until BP is controlled
 - If the patient is on nonpharmacological treatment, follow up should occur every three to six months until BP is controlled
- Review the list to determine if identified patients have upcoming appointments
 - If they do not, reach out to them to schedule a follow-up appointment
 - Flag appointment to notify provider that patient is coming in for a BP follow up