



Partner with patients

Workflow

Engage patients using collaborative communication strategies

- Begin with open-ended questions about adherence, including recent medication use
- Address “red flags” (e.g., missed appointments, prescription refills, requested labs and lack of therapeutic response to medication change)
- Explore reasons for possible non-adherence
- Elicit patient views on options and priorities to customize a care plan for each patient
- Remain non-judgmental at all times
- Use teach-back to ensure understanding of the care plan
- Use positive reinforcement to encourage healthy ideas or behaviors
- Use ask-provide-ask structure to ask patients what they already know about an issue; then, give brief answers to fill in gaps in their knowledge and ask them what they think

Educate patients on the following lifestyle changes that contribute to lowering blood pressure

- Follow a healthy diet such as the DASH eating plan, which is rich in fruits, vegetables and whole grains
- Reduce sodium intake to 1500 mg daily or reduce total sodium intake by at least 1000 mg
- Enhance potassium intake (if appropriate) from 3500 to 5000 mg daily
- Recommend weight loss to achieve ideal body weight if overweight
- Physical activity of at least 150 minutes per week (preferably >30 minutes, five days per week)
- Limit alcohol intake to two drinks per day for men and one drink per day for women

Tip: Provide resources for the above recommendations and referrals to community-based programs when possible

Train patients to perform self-measured blood pressure (SMBP) accurately

- Instruct patient to use a validated, automated SMBP device
- Teach patient correct positioning when performing SMBP
- Have patient take and record two readings in the morning and two readings in the evening for seven days (three days minimum) to make a diagnosis and assess control
- Develop a standardized approach to ensure patients can act rapidly to address readings that are out of range, especially if associated with symptoms such as chest pain, dizziness or shortness of breath
- Create a process to receive readings back from the patient
- Interpret and adjust treatment plan as needed

- Three weeks after medication changes, use the seven-day SMBP protocol
 - Instruct patient to communicate results to the care team (in-person, telephone, secure patient portal or secure email)
 - If BP is uncontrolled, recommend monthly follow up (to be determined by treating clinician)
- Once BP control is achieved, SMBP can be used one to two times a week or as directed by clinician

Develop and use strategies to improve patient medication adherence

- Educate patients on use, importance and effectiveness of antihypertensive medication
- Prescribe once-daily medications when possible
- Prescribe generic medications when possible
- Use single-pill combination therapy when possible
- Prescribe medications for 90 days at a time when possible
- Recommend patient works with the pharmacy to coordinate prescription refills for the same date
- Identify financial barriers patients may be experiencing and take steps to address
- Address issues of medication complexity and side effects
- Work with the pharmacy to determine if blister packs are appropriate