

# PLANK 4

## TOOL: Blood Pressure Check Visit Policy and Procedure (Kaiser Permanente)

KAISER FOUNDATION HOSPITAL  
SOUTHERN CALIFORNIA PERMANENTE  
MEDICAL GROUP  
POLICY AND PROCEDURE

Section OPERATIONS	NUMBER	
Title BLOOD PRESSURE MONITORING - Blood Pressure Check Visit	EFFECTIVE DATE	
	REVISION	

### PURPOSE

To promote health maintenance and improve patient care through appropriate blood pressure monitoring.

### POLICY

1. All adult patients presenting for an appointment or procedure will have their blood pressure measured when instructed to do so by the Proactive Office Encounter automated alert
2. Take and document a second blood pressure when indicated
3. Give the After Visit Summary (AVS) to all patients

### AUTHORIZED PERSONNEL

1. Provider - MD, PA, NP, CNM, CRNA
2. PharmD
3. RN
4. LVN/MA/Ortho Tech

### EQUIPMENT/SUPPLIES NEEDED

1. Sphygmomanometer or Automated Blood Pressure Machine
2. Appropriate-sized blood pressure cuff
3. Stethoscope
4. Chair with back support
5. Table to support arm at heart level

### PROCEDURE

\*Refer to Vital Signs P&P

#### Adult Primary Care Departments (scheduled provider visit):

1. Using appropriate technique, take the patient's sitting BP and enter in KPHealthConnect™ in the "Vitals" section. The date and time will automatically populate. After each documented measurement and at completion of vitals documentation, click the "Close" button in the "Vitals" section to ensure capture of all values.
2. The HTN "Best Practice Alert" will populate when the BP is elevated: greater than 139 systolic and/or greater than 89 diastolic, instructing the staff to repeat the blood pressure.
3. If the BP is elevated, wait one (1) minute and repeat. If the patient is 70 years of age or older take the second blood pressure in the standing position. Enter the new BP in KPHealthConnect™ in the "New Set of Vital Signs" section. The date and time will automatically populate. Click the "Close" button in the "Vitals" section. If the BP was standing, click on "Doc Flowsheet" in upper right corner. Under the recent BP, in the "BP Patient Position" box, select the paper icon, select standing then "Accept."



# PLANK 4

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4. Inform the member of their blood pressure.
5. The HTN “Best Practice Alert” will be addressed by the provider.

### **Module Blood Pressure Check scheduled appointment or walk-in (provider visit not scheduled):**

Note: As with any visit, if the patient expresses any complaints or questions, the MA must refer the patient to the RN or Provider

1. Open the patient’s chart from the resources schedule using Allied Health Encounter.
2. Using appropriate technique, take the patient’s sitting BP and enter in KPHealthConnect™ in the “Vitals” section. The date and time will automatically populate. After each documented measurement and at completion of vitals documentation, click the “Close” button in the Vitals section to ensure capture of all values.
3. The HTN “Best Practice Alert” will populate when the BP is elevated: greater than 139 systolic and/or greater than 89 diastolic, instructing the staff to repeat the blood pressure.
4. If the BP is elevated, wait one (1) minute and repeat. If the patient is 70 years of age or older take the second blood pressure in the standing position. Enter the new BP in KPHealthConnect™ in the “New Set of Vital Signs” section. The date and time will automatically populate. Click the “Close” button in the “Vitals” section. If the BP was standing, click on “Doc Flowsheet” in upper right corner. Under the recent BP, in the “BP Patient Position” box, select the paper icon, select standing then “Accept.”
5. Inform the member of their blood pressure.
6. Follow procedure in Table A based on the lowest BP reading

### **Specialty Care Departments:**

1. Using appropriate technique, take the patient’s sitting BP and enter in KPHealthConnect™ under the “Vitals” section. Click the “Close” button in the Vitals section.
2. The HTN “Best Practice Alert” will populate when the BP is elevated: greater than 139 systolic and /or greater than 89 diastolic, instructing the staff to repeat the blood pressure.
3. If the BP is elevated, wait one (1) minute and repeat. If the patient is 70 years of age or older take the second blood pressure in the standing position. Enter the new BP in HealthConnect™ in the “New Set of Vital Signs” Section. Click the “Close” button in the Vitals section. If the BP was standing, click on “Doc Flowsheet” in upper right corner. Under the recent BP, in the “BP Patient Position” box, select the paper icon, select standing then “Accept.”
4. If BP greater than 139/89, open the nursing note to document the elevated BP.
5. Inform the member of their Blood Pressure
6. Forward encounter to PCP by opening Follow up
  - 6.1 Add PCP to recipient list
  - 6.2 Enter .HBP in Routing Comments
  - 6.3 Exit the work space
7. If NO PCP assigned (this will not be consistent in every medical center), refer to HTN Hotline, if one is available, or PC DOD.



# PLANK 4

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**ADULT BLOOD PRESSURE CATEGORIES and ACTIONS (Table A)**

CATEGORY	SBP	DBP	Action
Low	109 or less		<p>MA/LVN:</p> <ul style="list-style-type: none"> <li>Recheck BP with patient standing.</li> <li>Standing SBP is 110 or greater, follow Action in “Controlled” category in this table.</li> <li>Standing SBP is 109 or less, refer to RN for evaluation</li> <li>Release patient as directed by RN or provider with BP recheck appointment in 2 months. Close encounter.</li> </ul> <p>RN:</p> <ul style="list-style-type: none"> <li>SBP 100 – 109 without symptoms and previous SBP 110 or greater: Instruct staff to make follow-up BP check appointment in 2 months, route encounter to PCP with smart phrase “.vs” in “Routing Instructions” and release patient.</li> <li>SBP 100 – 109 without symptoms and previous SBP 100 – 109: Discuss with provider for possible medication adjustment and timeframe for follow-up BP check.</li> <li>SBP 100 – 109 with symptoms or SBP 99 or less without symptoms: Discuss with provider for possible medication adjustment and timeframe for follow-up BP check.</li> <li>SBP 99 or less with symptoms, instruct staff to schedule patient to see provider today.</li> </ul>
Controlled	110-139	≤ 89	<p>MA/LVN:</p> <ul style="list-style-type: none"> <li>Direct the patient to follow up with another blood pressure check in about 6 months. Release the patient. Close encounter.</li> </ul>
Stage 1 Hypertension	140-159	90-99	<p>MA/LVN: Depending on module workflow</p> <ul style="list-style-type: none"> <li>Make BP recheck appointment in 2-4 weeks and release the patient. Route to PCP using “.HBP” in “Routing Instructions” OR</li> <li>Inform provider patient is waiting for further instructions OR</li> <li>Inform module RN that patient is waiting for further instructions</li> </ul>
Stage 2 Hypertension	160 - 179	100 - 109	<p>MA/LVN:</p> <ul style="list-style-type: none"> <li>Refer patient to RN or provider for evaluation prior to releasing the patient. Release the patient as directed by the RN or provider. Schedule the patient for a BP recheck in 1-2 weeks. Route to PCP using “.HBP” in “Routing Instructions”</li> </ul> <p>RN:</p> <ul style="list-style-type: none"> <li>No symptoms: Instruct MA/LVN to release patient with instructions above.</li> <li>Symptoms: Instruct MA to schedule patient to see provider today.</li> </ul>
Stage 2 Hypertension Urgent	>180	>110	Refer to provider for evaluation. Do not release the patient.



# PLANK 4

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### SmartPhrase List: Suggested RN Documentation Phrases (Table B)

#### *Stage 1 hypertension*

##### **.BP4 – BP 140-159/90-99**

Lowest BP 140-159/90-99. Blood pressure elevated. Current treatment to be continued. The staff is instructed to please inform patient of his/her blood pressure today. Tell patient to continue current medications and that today's visit will be routed to their PCP for review. We will notify them if doctor orders a change in medication. Prior to patient leaving, schedule appointment for blood pressure recheck in 2-4 weeks. The PCP was messaged with his/her last 3 encounter BP readings.

**Stage 2 hypertension:** RN to discuss case with provider to determine if medication adjustment needed prior to release of patient

##### **.BP2 - BP 160-179/100-109**

Lowest BP 160-179/100-109. The staff is instructed to schedule an appointment for blood pressure recheck in 1- 2 weeks before he/she leaves. Please inform patient of his/her blood pressure today. Tell patient to continue current medications and that today's visit will be routed to their PCP for review. PCP was messaged with his/her last 3 encounter BP readings.

##### **.BPTODAY - BP $\geq$ 180/110**

Lowest Systolic BP greater than or equal to 180 and/or Diastolic BP greater than or equal to 110. His/Her blood pressure is elevated, requiring evaluation today. The staff is instructed to schedule him/her to see a provider for blood pressure evaluation today.

##### **.MABP**

Please have patient come in for an MA blood pressure check in \*\*\* week(s).

#### *Low Blood Pressure*

##### **.BPLOWOK – SBP 100 - 109 standing asymptomatic on antihypertension medications**

Systolic BP 100 – 109 standing, he/she is asymptomatic and he/she is on hypertension medications. His/Her PCP was messaged with his/her last 3 encounter BP readings. The staff is instructed to schedule him/her an appointment with his/her PCP for follow-up in three months.

**.BPLOW – 1) Systolic BP less than 100 standing, symptomatic or asymptomatic or (2) Systolic BP 100 – 109 standing and symptomatic** The staff is instructed to schedule him/her to see a provider for blood pressure evaluation today.

