

HYPERTENSION...

Understanding the Numbers

A medical assistant training module

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Objectives

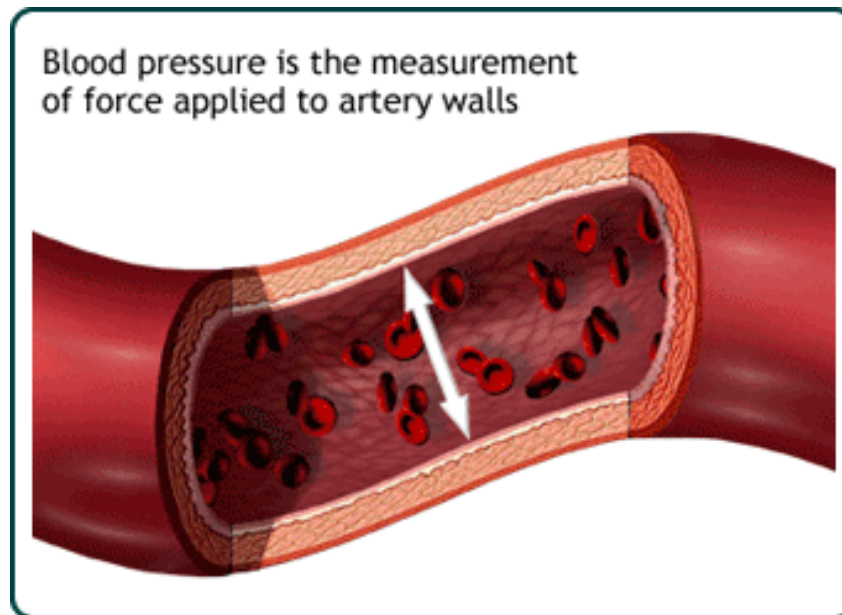
- Learner will state the definition of blood pressure.
- Be able to identify normal and abnormal B/P readings
- List 4 of the seven risk factors for hypertension
- State chronic conditions associated with uncontrolled hypertension

Objectives...continued

- Explain correct fit of blood pressure cuff
- List steps to taking accurate blood pressure readings.
- Verbalize medical assistants role during visit of patient with hypertension.

WHAT IT IS....

- Blood pressure is a measurement of the force against the walls of your arteries as your heart pumps blood through your body. Hypertension is another term used to describe high blood pressure.



NIH

WHAT IT IS...

- **SYSTOLIC** (top number)

The force of blood exerted against artery walls when the heart contracts

- **DIASTOLIC** (bottom number)

The force of blood exerted against artery walls when the heart is resting

NORMAL vs ABNORMAL

Blood Pressure Category	Systolic mm Hg (upper #)		Diastolic mm Hg (lower #)
Normal	less than 120	and	less than 80
Prehypertension	120 – 139	or	80 – 89
High Blood Pressure (Hypertension) Stage 1	140 – 159	or	90 – 99
High Blood Pressure (Hypertension) Stage 2	160 or higher	or	100 or higher
<u>Hypertensive Crisis</u> (Emergency care needed)	Higher than 180	or	Higher than 110

MQIC Guidelines

Risk Factors



Causes of High Blood Pressure

- Artery stenosis
(hardening of the arteries)
- Pregnancy
- Medications
- Chronic kidney disease
- Other chronic disease processes



Symptoms

- **USUALLY NONE**



Patients with a severe form of HTN may have:

- Severe headache
- Nausea/vomiting
- Confusion
- Vision changes
- Nosebleed

Uncontrolled hypertension leads to.....

- Stroke
- Vision problems
- Heart Attack
- Kidney Disease
- Decrease blood supply to legs



Diagnosing Hypertension

- 2 or more elevated BP measurements on initial visit plus one or more follow-up visits
- Separate B/P readings by at least 2 minutes with the patient seated and standing, and verify in opposite arm
- Physical exam by provider...including blood work, EKG, and urinalysis

Accurate B/P Readings



- Cuff size is vital

Using a cuff that does not fit the person's arm can result in inaccurate readings. The cuff should be wide enough to reach from just below the armpit to the inside of the elbow. The cuff should completely encircle the arm with several inches to spare. AMA

Thigh size cuffs should be available and used when appropriate.

Accurate B/P readings (2)

- Calm Patient-sitting about 5 minutes
- Good body posture (patient)-feet on floor, arm at heart level and supported, legs uncrossed
- Use calibrated/validated equipment

American Heart Association



Role

in the care of a patient
with HYPERTENSION



- Medication reconciliation

- Is the patient taking ALL medications as ordered?
 - When was last time meds were taken?

- Take accurate BP and document

- Report extremely elevated/low readings to provider
(follow your HC policies and standing orders)

- Obtain any documentation of home BP readings (check accuracy of home device)

- Ensure follow up visits and referrals are scheduled or completed. (wt loss or exercise program, dietitian, cardiologist, nephrologist etc...)
- Reinforce lifestyle changes:
 - * weight loss (if needed)
 - * decrease salt intake (lunch meat, canned veggies, chips, nuts, canned soups)
 - * exercise
 - * smoking cessation
 - * DASH diet-fruit, veggies, low fat
 - * Encourage stress reduction techniques-yoga/meditation
 - * Limit alcohol

Resources

- MQIC Guidelines

<http://mqic.org/>

- National Institute of Health

<http://www.nlm.nih.gov/medlineplus/ency/article/000468.htm>

- American Heart Association

https://www.heart.org/idc/groups/heart-public/@wcm/@hcm/documents/downloadable/ucm_445846.pdf

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