The Effects of Protocol Change and Blood Pressure Control
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PURPOSE

• To improve quality metric scores for blood pressure control in a suburban, North Carolina medical office.

BACKGROUND & SIGNIFICANCE

• The office has a quality metric score of 65.4% for blood pressure control. The goal for this quality metric score is 74%.

• This project will help explore factors that influence blood pressure measurements.

• Factors include: non-adherence to BP guidelines by clinicians, patient positioning, cuff placement, white coat syndrome, and burnout.

• Per AHA guidelines, it is crucial to obtain precise blood pressure readings to properly manage hypertension (Levy et al., 2016).

• Nonadherence to guidelines may lead to inaccurate diagnosis, which can contribute to improper treatment of hypertension (Levy et al., 2016).

METHOD

• New protocol placed to guide clinical staff with proper technique when obtaining blood pressure measurements.

Protocol for Blood Pressure Control

1. Give patient approximately 5 minutes to rest after rooming.

2. When obtaining vital signs, measure blood pressure last. Chart vitals.

3. If the patient is hypertensive per JNC 8 guidelines (140/90), take the blood pressure again in the opposite arm.

4. Chart the second blood pressure reading.

5. If patient hypertensive after second reading, make the provider aware. Provider will re-take BP.

6. Provider to chart third reading. Include “Hypertension Education” in the AVS for patient.

LIMITATIONS

• The major limitation within this local primary care office is non-adherence to blood pressure guidelines, which is believed to derive from underlying issues such as burnout, resulting from high turn-over rates and staffing shortage.

RESULTS

• The pre-implementation quality metric score is the average of blood pressure control scores from the five office providers for August 2020 - October 2020.

• The post-implementation quality metric score is the average of blood pressure control scores from the five office providers for August 2021 - October 2021.

CONCLUSIONS

• The goal for the average blood pressure control score among the five providers was not met.

• This office’s average quality metric score for blood pressure control post-implementation was 61.6%.

References
