

Self-Measured Blood Pressure **TOOLKIT**



AUCH

ASSOCIATION FOR UTAH COMMUNITY HEALTH

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Purpose

This toolkit will help health centers improve hypertension control among their patients through the use of self-measured blood pressure (SMBP) in patients' homes. In 2018, only 54% (750 out of 1,373) of health centers throughout the United States met or exceeded the Healthy People 2020 Hypertension Objective. This objective is that 61.2% or more of the health center's patients diagnosed with hypertension currently have their blood pressure under control. Controlled blood pressure is defined as having a systolic blood pressure of <140mm Hg and diastolic blood pressure of <90mm Hg. Uncontrolled hypertension can lead to multiple negative health outcomes and health centers that are struggling to help their patients achieve normal blood pressure may want to offer SMBP as one tool to improve these outcomes.

What is Blood Pressure?

Blood pressure is the force of blood circulating against the blood vessel walls as it flows through the body from the heart and to the circulatory system. There are two types of blood pressure, systolic and diastolic. Systolic blood pressure is how much pressure is exerted against the vessel walls when the heart contracts. Diastolic blood pressure is how much pressure is exerted against the vessel walls when the heart relaxes (HHS, 2016).

What is Hypertension?

Hypertension, also known as high blood pressure, is defined as systolic blood pressure greater than 140mm Hg and diastolic blood pressure greater than 90mm Hg (HHS, 2016). For this toolkit, the terms hypertension and high blood pressure will be used interchangeably. Patient screening for hypertension must be performed at a clinic or with the use of a self-measured blood pressure (SMBP) device. If left untreated, hypertension can lead to heart attack, stroke, kidney disease, kidney failure, vision loss, sexual dysfunction, heart disease, or peripheral artery disease (AHA, 2021). Researchers have discovered that patients with hypertension may have an increased risk of dementia (Iadecola & Gottesman, 2019). A patient with hypertension needs to be monitored closely due to the seriousness of these sequelae.

Figure 1. **What is hypertension?**

Systolic mm Hg		Diastolic mm Hg	Blood Pressure
Less than 120	&	Less than 80	Normal
120-129	&	Less than 80	Elevated
130-139	or	80-89	Hypertension stage 1 (High Blood Pressure)
140 or higher	or	90 or higher	Hypertension stage 2 (High Blood Pressure)
Higher than 180	&/or	Higher than 120	Hypertension Emergency (See doctor immediately)

Hypertension is often referred to as the "Silent Killer" due to the lack of symptoms in many patients. Research has shown that as many as one in three patients with hypertension have not been diagnosed (Virani et al., 2020). Many patients believe that hypertension only affects the elderly; however, research shows that one in four people between the ages of 20-44 has high blood pressure (Iadecola & Gottesman, 2019).

Causes and Prevention

A variety of conditions increase the risk of hypertension. A few examples include:

- Inactive lifestyle
- Pregnancy
- Diabetes
- Obesity
- Genetic makeup

Other risk factors for hypertension include age, sex, and race or ethnicity. As people age, their risk of hypertension increases. Men younger than 55 have a higher diagnosis rate of hypertension than women; however, women over 55 are more likely to be diagnosed with hypertension than men over 55. High blood pressure is disproportionately represented in African American men and women compared to other racial and ethnic groups (NIH, 2021).

Some lifestyle changes can reduce the risk of developing hypertension or help to lower blood pressure, including:

- Regular Exercise
- Tobacco Cessation
- Stress Management
- Maintaining a Healthy Diet
- Limited Alcohol Intake
- Maintaining a Healthy Weight

Patients should discuss these interventions with their healthcare team to determine an appropriate action plan.

White Coat and Masked Hypertension

Many people are anxious when in a clinic. This can cause blood pressure to raise in that setting. As a result, patients with normal blood pressure could have an elevated blood pressure reading while in a clinic. This phenomenon is known as White Coat Hypertension. Masked Hypertension is the exact opposite of White Coat Hypertension. Masked Hypertension happens when a patient who has high blood pressure tests normal when inside a clinic. The percent of patients believed to experience White Coat Hypertension is around 10%-30%. The percent of patients with Masked Hypertension is around 10%-15% (Unger, et al., 2020).

There are other behaviors that may contribute to a temporary increase in blood pressure if they are done within 30 minutes of getting tested, including eating, smoking, drinking alcoholic or caffeinated drinks, and exercising (CDC, 2021). For these reasons, it is ideal to test blood pressure both inside and outside of a clinic to get the most accurate picture.

How to take blood pressure at home

- **Be still.** Advise patients to not eat, smoke, drink caffeinated beverages or alcohol, or exercise within 30 minutes of measuring blood pressure. Ask patients to empty their bladder and ensure at least 5 minutes of quiet rest before measurements.
- **Sit correctly.** Ask patients to sit with their back straight and supported (for example, on a firm chair, rather than a sofa). Feet should be flat on the floor and legs should not be crossed. The arm should be supported on a flat surface (such as a table) with the upper arm at heart level. Make sure the bottom of the cuff is placed just above the bend of the elbow. Check the monitor's instructions for an illustration of the correct placement.
- **Measure at the same times every day.** For at-home blood pressure monitoring, it is important to take the readings at the same times each day, morning and evening. It is best to take readings daily.
- **Take multiple readings and record the results.** Advise patients to take one or two readings one minute apart and record each of the results. If the monitor has built-in memory to store readings, advise patients to take the monitor with them to appointments.
- **Don't take the measurement over clothes.**

Why does taking an accurate blood pressure matter?

Measuring blood pressure regularly can help diagnose hypertension early and can demonstrate whether medications and lifestyle changes are effective, but only if the readings are accurate. To get the most accurate readings, both in a clinic and at home, patients should follow this checklist:

- Do not eat or drink anything 30 minutes before you take your blood pressure.
- Empty your bladder before your reading.
- Sit in a comfortable chair with your back supported and rest for at least 5 minutes before your reading.
- Put both feet flat on the ground and keep your legs uncrossed.
- Rest the arm you will be checking on a table or other surface at chest height.
- Place the cuff just above the fold of the elbow. Make sure the blood pressure cuff is snug but not too tight. The cuff should be against your bare skin, not over clothing.
- Do not talk or use an electronic device while your blood pressure is being measured.

When reading your blood pressure at home make sure that you log your blood pressure every time, take your blood pressure at the same times of day, and take at least two readings - 1 to 2 minutes apart – for accuracy (NIH).

What is SMBP?

Self-measured blood pressure (SMBP) is having a patient check their blood pressure. This is usually done outside of the clinic. Measuring blood pressure in a more familiar environment results in more accurate measurements. The process of taking these readings can also result in patients being more engaged in their health.

SMBP Integration into the workflow overview

Integrating SMBP into normal clinic workflow requires collaboration. Clinics may want to involve community or public health organizations to assist patients who are using SMBP. If a clinic is collaborating with external partners, all individuals need to be clear about which team members can and cannot perform certain tasks.

These checklists show key tasks required for a successful SMBP program:

1. Patient education - see patient education checklist
2. SMBP scope/protocol - see SMBP scope checklist
3. Home BP Monitors - see home BP monitors checklist and list of validated monitors
4. SMBP Patient Identification - see SMBP patient identification checklist
5. SMBP training - see SMBP training checklist
6. SMBP outreach support and follow up - see SMBP outreach support and follow up checklist
7. SMBP Data Management - see SMBP data management checklist
8. Community Linkages - see community linkages checklist

Other things to consider are whether patients doing SMBP will be loaned a monitor by the clinic or be required to purchase one. If the patients will be transferring data to the clinic, they will need education on how to do this. Patients' arms should be measured by clinic staff to ensure that the patient receives the correct cuff size. Arm sizes 8.7" – 10.4" should use a small adult cuff; 10.5" – 13.6" should use a standard adult cuff; 13.7" – 17.5" should use a large adult cuff; and 17.6" – 21.2" should use an extra- large cuff. Using a cuff that is too small or too large can result in inaccurate blood pressure readings. (Target BP)

Determining organizational goals for using SMBP is essential, too, to ensure that all team members are working towards the same goals. For example, team members should agree on which patients will be prioritized for SMBP and what the protocol for its use will be. Clinics may want to use risk stratification to identify patients most likely to benefit. The key is to have a plan that all team members are aware of and support.

Tasks by Role

Licensed clinicians will begin the process of introducing SMBP. The roles of licensed clinicians include diagnosing hypertension and, where appropriate, prescribing medication and lifestyle changes to control it. The clinician will prescribe the patient a SMBP protocol to utilize at home. The clinician must also interpret blood pressure readings from the patient to monitor the patient's progress and adjust medications where necessary. These medications and lifestyle recommendations will hopefully lead to better hypertension control. The clinician may work directly with a nurse or medical assistant (MA) who is part of the care team. The nurse or MA will help the patient understand how to use the SMBP device and protocol.

Pharmacists are part of the care team in many health centers and can help patients with hypertension to understand potential side effects or drug-to-drug interactions of their hypertension management medications.

SMBP supporters, such as medical assistants, community health workers (CHWs), or health department representatives, can help promote the use of SMBP devices. These supporters can provide the patients with additional training to operate their monitors and provide a connection between the clinician and the patient. SMBP supporters can encourage patients and help direct questions to clinicians or other members of the care team.

Providing training to other clinic staff on how to properly document SMBP readings in the patient chart is extremely important. This reporting can be done through many different platforms, such as device memory, a smartphone application, or through a patient portal. Clinics must identify who will be responsible for making sure the clinicians review these readings.

Patient Education Checklist

developed by the American Heart Association

<https://www.ama-assn.org/system/files/2020-11/smbp-patient-training-checklist-in-person.pdf>

PROVIDE EDUCATIONAL MATERIALS

- What is SMBP?
<https://www.ama-assn.org/system/files/2021-01/what-is-smbp.pdf>
- SMBP infographic.
<https://www.ama-assn.org/system/files/2020-11/smbp-infographic.pdf> (English)
<https://www.ama-assn.org/system/files/2020-11/smbp-infographic-spanish.pdf> (Spanish)
- SMBP recording log.
<https://www.ama-assn.org/system/files/2020-11/smbp-recording-log.pdf> (English)
<https://www.ama-assn.org/system/files/2020-11/smbp-recording-log-spanish.pdf> (Spanish)
- SMBP device accuracy test.
This can be used to calibrate a patient's BP measurement device.
<https://www.ama-assn.org/system/files/2021-01/smbp-device-accuracy-test.pdf>

PROVIDE BACKGROUND INFORMATION ON SMBP

- Explain how SMBP allows the provider to get a more accurate and complete picture of the patient's blood pressure outside of the office (more readings, over a longer period of time, in the patient's usual environment) Tip: Hand out the "What is SMBP?" document.

DETERMINE CORRECT SMBP CUFF SIZE

- Use tape measure to measure the circumference of patient's mid-upper arm in centimeters (refer to SMBP cuff selection resource for more detail) Cuff Selection Resource <https://targetbp.org/patient-measured-bp/implementing/smbp-selecting-the-right-cuff-size/>

TEACH PATIENT HOW TO PROPERLY PREPARE FOR SELF-MEASUREMENT

- Instruct patient to avoid caffeine, alcohol, food, tobacco and exercise for at least 30 minutes before measurements.
- Instruct patient to empty bladder before taking blood pressure measurements.
- If blood pressure is measured in the morning, instruct the patient to take BP measurements before taking blood pressure medications.
- Tip: Show SMBP training video and/or the SMBP infographic to train patients.
<https://www.youtube.com/watch?v=S1esBNGtfJc> (English)
<https://www.youtube.com/watch?v=QVdvbymoYQU> (Spanish)

TEACH PATIENT THE PROPER POSITIONING FOR SELF-MEASUREMENT

- Seated with back supported on a firm chair.
- Feet flat on floor or firm surface.
- Legs uncrossed.
- Cuff placed on bare upper arm.
- Arm supported with middle of cuff at heart level.
- Tip: Use SMBP training video to teach these points and save time.

TEACH PATIENT HOW TO USE DEVICE (IF APPLICABLE)

- How to turn on device.
- How to start measurement.
- How to troubleshoot.
- How to calibrate device.
- Refer to device manual as needed.

TEACH PATIENT HOW TO PROPERLY SELF-MEASURE

- Rest quietly for five minutes.
- Take two measurements, one minute apart.
- Avoid conversations and the use of electronic devices during measurement
- Perform this process once in the morning and once in the evening for seven consecutive days.
- Tip: Show SMBP training video and/or the SMBP infographic to reference later.

TEACH PATIENT HOW TO RECORD SMBP MEASUREMENTS AND HOW AND WHEN TO SHARE RESULTS

- Educate patient on what to do if blood pressure measurements are above or below specified ranges.
- If the patient will be using a mobile application, patient portal, or other digital health tool, ensure patient is able to correctly use the technology to collect and share results.
- If the patient will be using a paper SMBP Recording Log, show the patient how to enter the results.

Use teach back method to ensure patient understands the education provided and address any additional questions or concerns from patient.

SMBP Scope (NACHC)

Determine organizational goals for using SMBP

SMBP GOALS:

Determine Priority Populations(s)

SMBP TARGET POPULATIONS:

Determine if SMBP is having desired effect (i.e. how will you know it's working?)

SMBP TARGET RESULTS:

Home BP Monitors

DETERMINE WHICH HOME BP MONITORS TO USE. CHOOSE A VALIDATED UPPER ARM DEVICE (see list of Validated Devices). CONSIDER: WHETHER IT COMES WITH AN XL CUFF, BLUETOOTH CAPABILITY, MEMORY STORAGE CAPACITY, ABILITY TO HAVE MULTIPLE USERS, EASE OF USE, INSURANCE COVERAGE, COST

Select a Home BP Monitor:

DETERMINE HOW PATIENTS WILL OBTAIN HOME BP MONITORS

- Loaned
- Purchased by health center (for patient to keep)
- Purchased by patient
- Purchased by outside organization
- Purchased through insurer

DETERMINE HOW PATIENTS WILL PHYSICALLY RECEIVE THEIR HOME BP MONITOR, IF LOANED OR PURCHASED BY OTHER THAN THE PATIENT

- Full face-to-face visit
- Mailed to patient
- Patient stops by the health center
- Staff delivers to patient

KEEP AN INVENTORY OF MONITORS

- Number of home BP monitors purchased:_____
- Number of home BP monitors donated: _____
- Identify staff member responsible for tracking SMBP inventory

DETERMINE NUMBER OF CUFF SIZES TO PURCHASE

- Number of Small Adult Cuffs (Fits arm sizes 8.7" – 10.4"):_____
- Number of Standard Adult Cuffs (Fits arm sizes 10.5" – 13.6"):_____
- Number of Large Adult Cuffs (Fits arm sizes 13.7" – 17.5"):_____
- Number of Extra-Large Cuffs (fits arm sizes 17.6" – 21.2"):_____

Home BP Monitors

DETERMINE HOW LONG PATIENTS WILL KEEP MONITORS (IF LOANED) (E.G., 2 WEEKS, 1 MONTH, ETC.)

Our protocol:

DETERMINE WHAT CONTROLS TO PUT IN PLACE IF PATIENTS DO NOT RETURN HOME BP MONITORS (E.G., # OF PHONE CALLS, # LETTERS, ETC.)

Our protocol:

DETERMINE WHERE HOME BP MONITORS WILL BE PHYSICALLY STORED (CONSIDER SEPARATE LOCATIONS FOR "CLEAN" VS. "DIRTY")

Our protocol:

DETERMINE HOW HOME BP MONITORS ARE TRACKED, INVENTORIED, CLEANED, AND MANAGED.

Our protocol:

DETERMINE WHERE ADDITIONAL FUNDING FOR MONITORS AND ADDITIONAL STAFF TIME WILL COME FROM.

Our protocol:

Validated SMBP Devices

Omron

10 SERIES WIRELESS - ECW COMPATIBLE

<https://omronhealthcare.com/products/10-series-wireless-upper-arm-blood-pressure-monitor-bp7450/>

3 SERIES

<https://omronhealthcare.com/products/3-series-upper-arm-blood-pressure-monitor-bp7100/>

5 SERIES

<https://omronhealthcare.com/products/5-series-upper-arm-blood-pressure-monitor-bp7200/>

5 SERIES WIRELESS

<https://omronhealthcare.com/products/5-series-wireless-upper-arm-blood-pressure-monitor-bp7250/>

7 SERIES WIRELESS - ECW COMPATIBLE

<https://omronhealthcare.com/products/7-series-wireless-upper-arm-blood-pressure-monitor-bp7350/>

COMPLETE WIRELESS

<https://omronhealthcare.com/products/complete-upper-arm-blood-pressure-monitor-ekg-bp7900/>

A&D Medical

ADVANCED MANUAL INFLATE BLOOD PRESSURE MONITOR

https://medical.andonline.com/product/advanced-manual-inflate-blood-pressure-monitor/ua-705vl?commerce_product=12

TALKING+ BLOOD PRESSURE MONITOR

https://medical.andonline.com/product/premium-blood-pressure-monitor-verbal-assistance/ua-1030t?commerce_product=14

ULTRACONNECT WIRELESS BLOOD PRESSURE MONITOR

https://medical.andonline.com/product/ultraconnect-premium-wireless-wrist-blood-pressure-monitor/ub-1100ble?commerce_product=30

Hillrom-Welch Allyn

WELCH ALLYN HOME BLOOD PRESSURE MONITOR, 1700 SERIES - ECW COMPATIBLE

<https://www.welchallyn.com/en/products/categories/welch-allyn-home/connected-blood-pressure-monitors/home-bp-monitor.html>

SMBP Patient Identification

DETERMINE ANY SELECTION CRITERIA BEYOND ELIGIBILITY FOR PATIENTS (E.G. CONSIDER THE NEED FOR AND AVAILABILITY OF INTERPRETERS, PATIENTS' PHYSICAL OR MENTAL CAPACITY TO USE A HOME BLOOD PRESSURE MONITOR, SAFE PLACE TO STORE A HOME BLOOD PRESSURE MONITOR, NO SHOW HISTORY, PATIENT INTEREST, ETC.)

Our protocol:

DETERMINE PATIENT IDENTIFICATION METHODS:

- Clinician decision support in EHR
- Clinician recommends
- Patient screening/preference survey
- Pre-visit planning
- Patient request
- Registry queries and targeted outreach

DETERMINE HOW TO ASSESS IF APPROPRIATE PATIENTS ARE BEING IDENTIFIED AND OFFERED SMBP

Our protocol:

SMBP Training

DETERMINE WHO TRAINS THE PATIENT ON SMBP (Check all that apply)

- Clinician
- Nurse
- Medical Assistant
- Community Health Worker
- Health Department Representative

DETERMINE HOW THE PATIENT WILL CONNECT WITH THE SMBP TRAINER (PHONE CALL, VIDEO CALL, IN PERSON APPOINTMENT, ETC.)

Our protocol:

DETERMINE SMBP TRAINING CURRICULUM/RESOURCES (E.G., WHAT IS SMBP?; PROTOCOL (TWO MEASUREMENTS AM AND PM FOR SEVEN DAYS), HOW TO USE THE DEVICE; HOW TO TAKE BP AT HOME PROPERLY, ETC.)

Our protocol:

SMBP Outreach Support and Follow-up

DETERMINE HOW OUTREACH SUPPORT WILL BE PROVIDED

- Electronic patient communication (text or email programs)
- Home visit
- Scheduled telehealth check-in
- Unscheduled telephone call

DETERMINE ENCOUNTER TYPE FOR INITIAL FOLLOW-UP APPOINTMENT

- Face-to-face visit with:
 - Nurse
 - Pharmacist
 - Clinician
 - Other support staff, such as a medical assistant, CHW, or health department representative

- Telehealth visit with:
 - Nurse
 - Pharmacist
 - Clinician
 - Other support staff, such as a medical assistant, CHW, or health department representative

SMBP Data Management

DETERMINE HOW PATIENTS WILL RECORD/SHARE DATA WITH THE CARE TEAM

Our protocol:

DETERMINE WHAT TYPES OF SMBP MEASUREMENTS CLINICIANS WANT TO SEE

- 7-day SMBP averages
- All individual home BP readings
- Outlier BP readings (very high or very low)

DETERMINE WHAT ADDITIONAL SMBP-RELATED DATA ELEMENTS ARE IMPORTANT TO CAPTURE (E.G., DATE STARTED/COMPLETED, NUMBER OF MEASUREMENTS/DAYS, TREATMENT DECISIONS, ETC.)

Our protocol:

DETERMINE WHERE SMBP DATA WILL BE DOCUMENTED (MAY REQUIRE CUSTOM HIT CONFIGURATION)

- Direct from home BP monitor to EHR
- Manually document in EHR
- Population health management system
- Spreadsheet
- Patient Portal
- Other

DETERMINE WHEN AND HOW OFTEN CLINICIANS WANT TO REVIEW SMBP DATA (I.E., WHERE AND IN WHAT FORMAT DOES IT FIT IN THE WORKFLOW) AND WHO IS RESPONSIBLE FOR MAKING SURE THE DATA GET REVIEWED.

Our protocol:

Community Linkages

DETERMINE WHAT ROLE COMMUNITY PARTNERS COULD PLAY TO SUPPORT OR OPTIMIZE THE EFFICIENCY/CAPACITY OF YOUR SMBP EFFORT

- Conduct outreach
- Provide lifestyle support programs/education
- Provide SMBP training and/or ongoing support
- Supply funds to purchase home blood pressure monitors
- Others

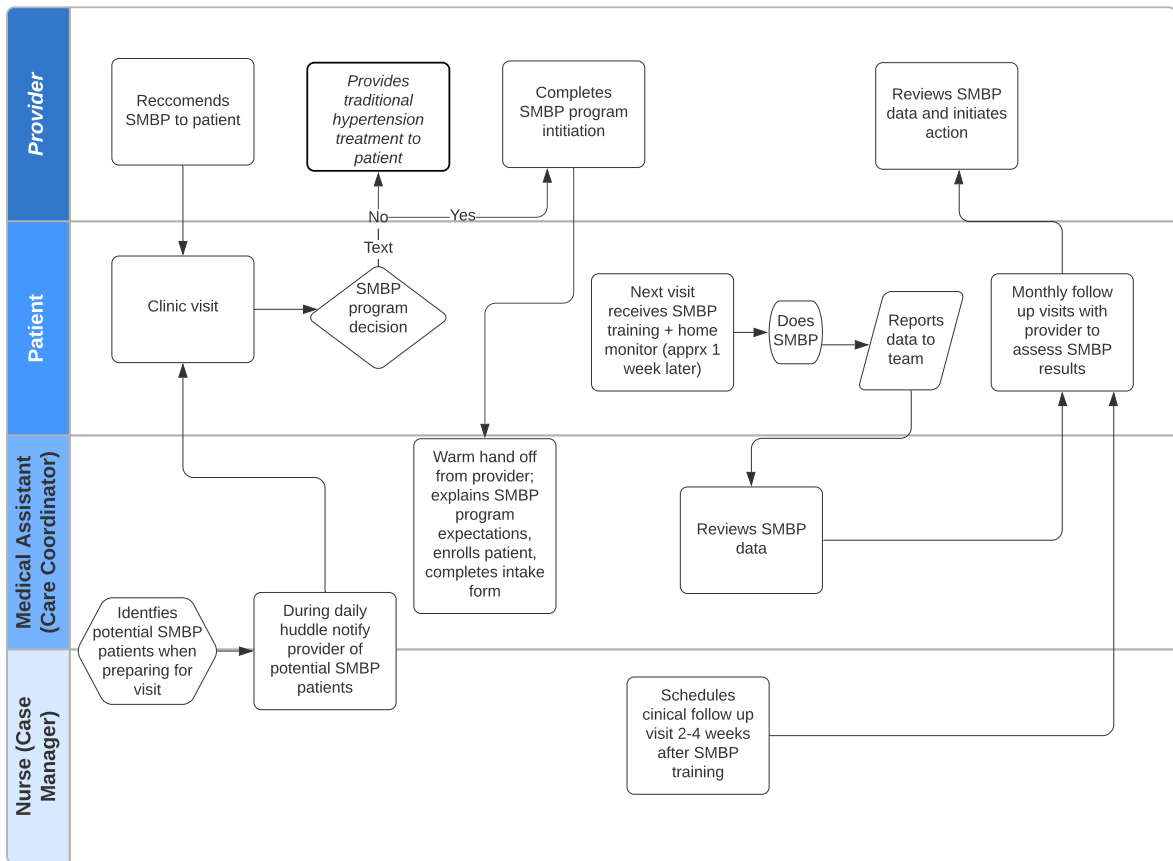
DETERMINE COMMUNITY PARTNERS AND ROLES THAT ARE PART OF THE SMBP EFFORT

Our protocol:

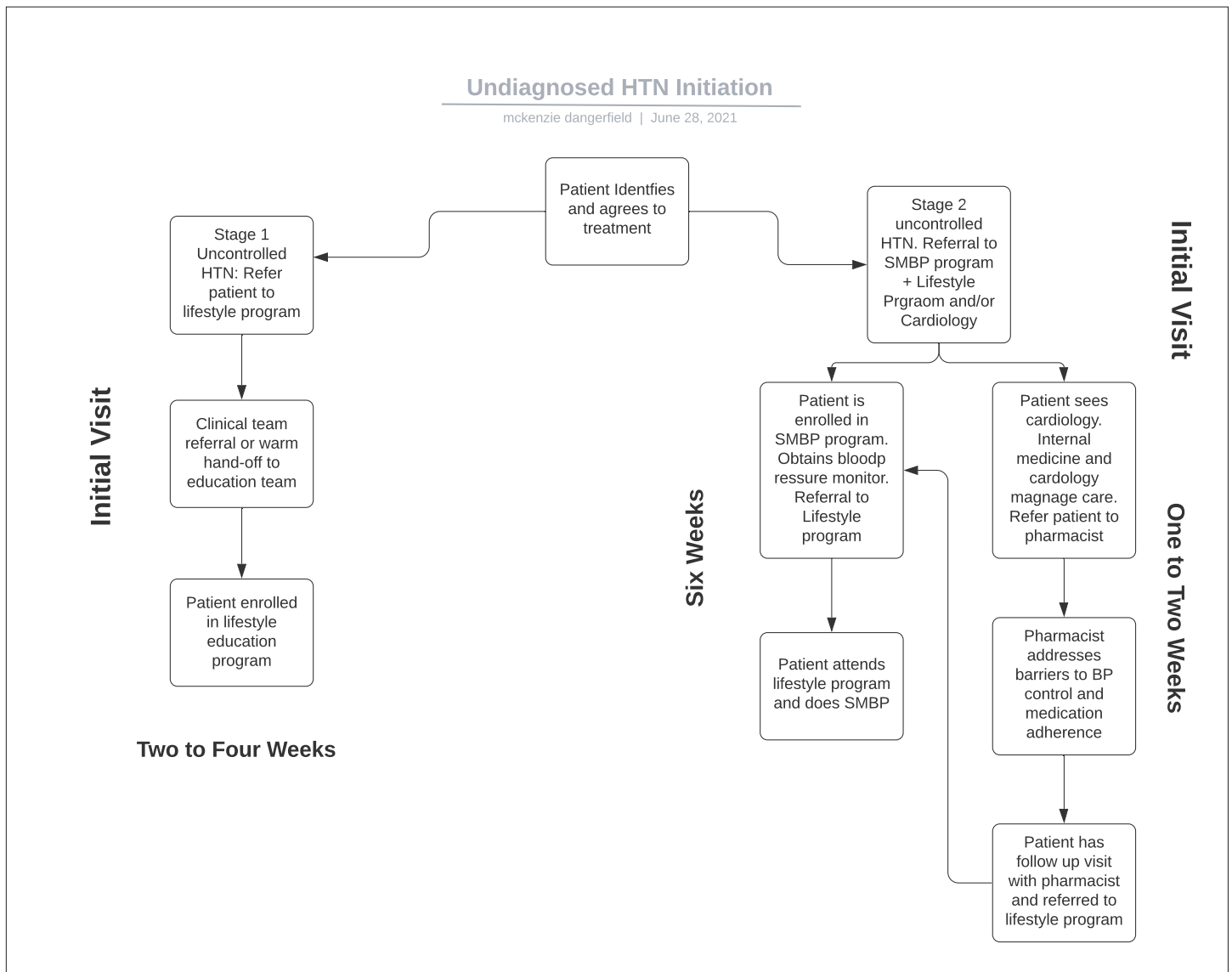
SMBP Workflow 1

Sample Workflow 1

mckenzie dangerfield | June 28, 2021



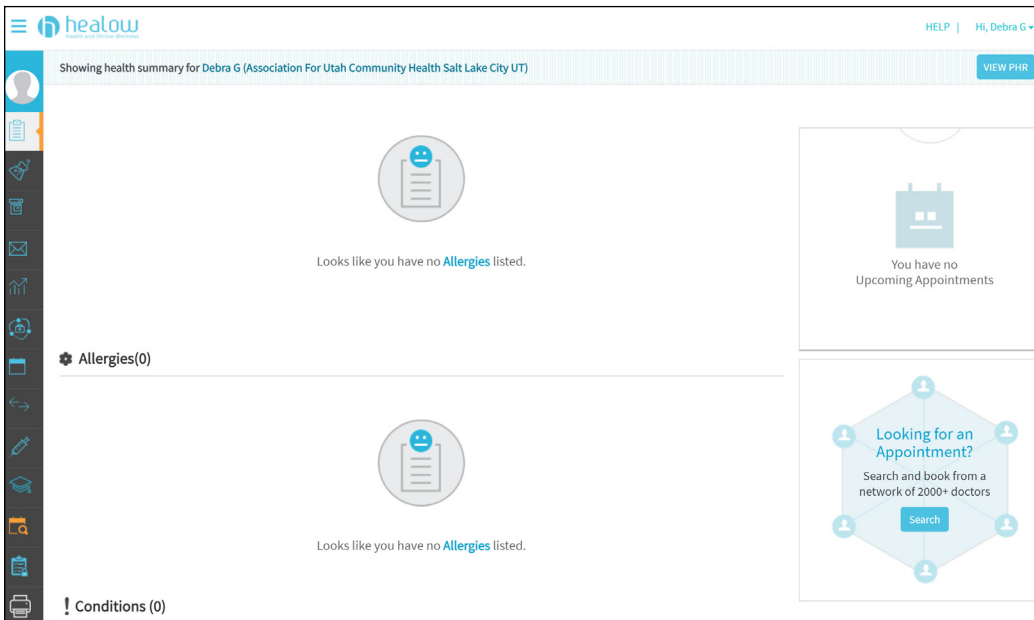
SMBP Workflow 2



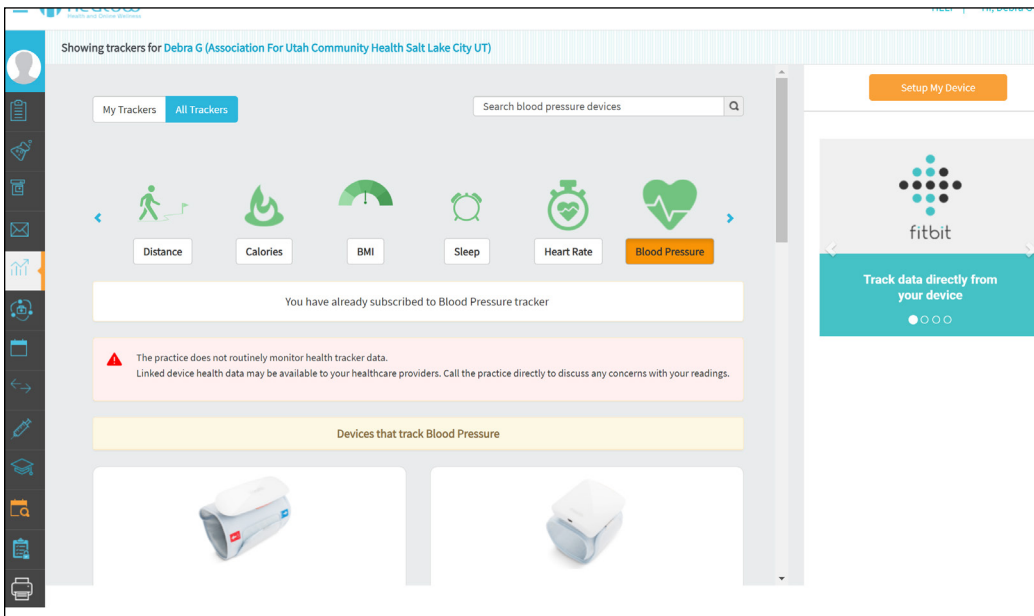
eCW and Healow Tracker Integration (Healow)

FOR PATIENT:

1. Have patient log into Healow. Below is the initial page after login.



2. Click on the trackers icon. Click on blood pressure to select the blood pressure tracker.



3. Below is the list of devices that integrate with Healow

Devices that track Blood Pressure

iHealth Feel
Forget the wires and tubes. This no hass...
\$99.95 [Buy](#)
Already Have a iHealth Account? [Setup](#)
Also tracks

iHealth Sense
Convenience, reliability and style are a...
\$79.95 [Buy](#)
Already Have a iHealth Account? [Setup](#)
Also tracks

Omron 10 Series Wireless Upper Arm Blood Pressure Monitor
The Omron 10 Series® Wireless Blueto...

Omron 7 Series Upper Arm Blood Pressure Monitor
The Omron 7 Series® Wireless Blueto...

[Setup My Device](#)

fitbit
Track data directly from your device

4. Continued list. Click Setup My Device. A page to select device or to track manually will appear.

Setup My Device

Qardio Arm
QardioArm blood pressure monitor is clin...
\$99.00 [Buy](#)
Already Have a Qardio Account? [Setup](#)
Also tracks

WelchAllyn Home 1700 Blood Pressure Monitor
Trusted in the doctor's office, ma...
Already Have a WelchAllyn Account? [Setup](#)

WelchAllyn Home 1500 Blood Pressure Monitor
Trusted in the doctor's office, ma...
Already Have a WelchAllyn Account? [Setup](#)

Withings Wireless Blood Pressure Monitor
Easy and precise self-measurement of you...
\$129.95 [Buy](#)
Already Have a Withings Account? [Setup](#)

withings
TRACK DATA DIRECTLY FROM YOUR DEVICE

5. Enter in the blood pressure with the date, time, and the heart rate.

Readings from this device may be available to any practice that you've linked, but this information is not monitored. If you have a reading that concerns you, consider contacting your doctor's office.

New Entry

Date: 02/03/2021 Time: 12:30 PM

Systolic / Diastolic (mmHg)

Heart Rate (bpm)

e.g 122/85

Average: 7 days 30 days 90 days

112/80

What does this mean?
As per the American Heart Association

Category	Systolic	And	Diastolic
Normal	< 120	And	< 80
Prehypertension	120-139	Or	80-89
Hypertension	≥ 140	Or	≥ 90
Hypertensive Crisis	≥ 180	Or	≥ 110

Week: 01/31/2021 - 02/06/2021

Week Month Date Range

LOGS

Source	Date Time	Systolic	Diastolic	Heart Rate	Notes
	02/03 12:22 PM	112	80	23	-

6. Now the blood pressure and heart rate are documented.

Showing trackers for Debra G (Association For Utah Community Health Salt Lake City UT)

My Trackers All Trackers

Blood Pressure as recorded on 3 Feb 2021 12:22 PM

112/80 mmHg **23 bpm** 112/80 mmHg

Systolic / Diastolic Heart Rate 30 day average

Low Normal Prehypertension Hypertension

ADD DEVICE

Heart Rate as recorded on 3 Feb 2021 12:22 PM

23 bpm

ADD DEVICE

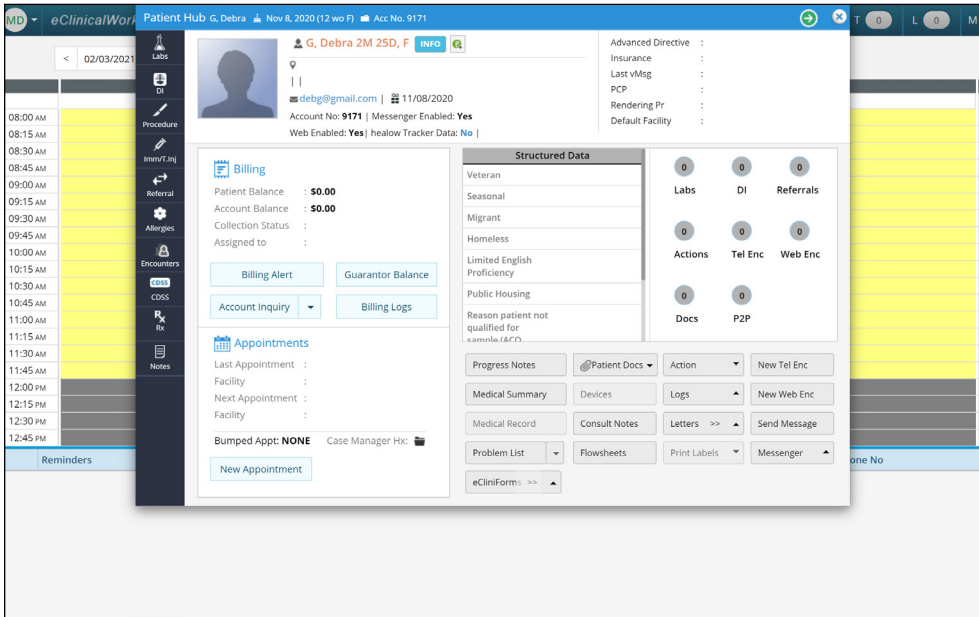
Setup My Device

iHealth

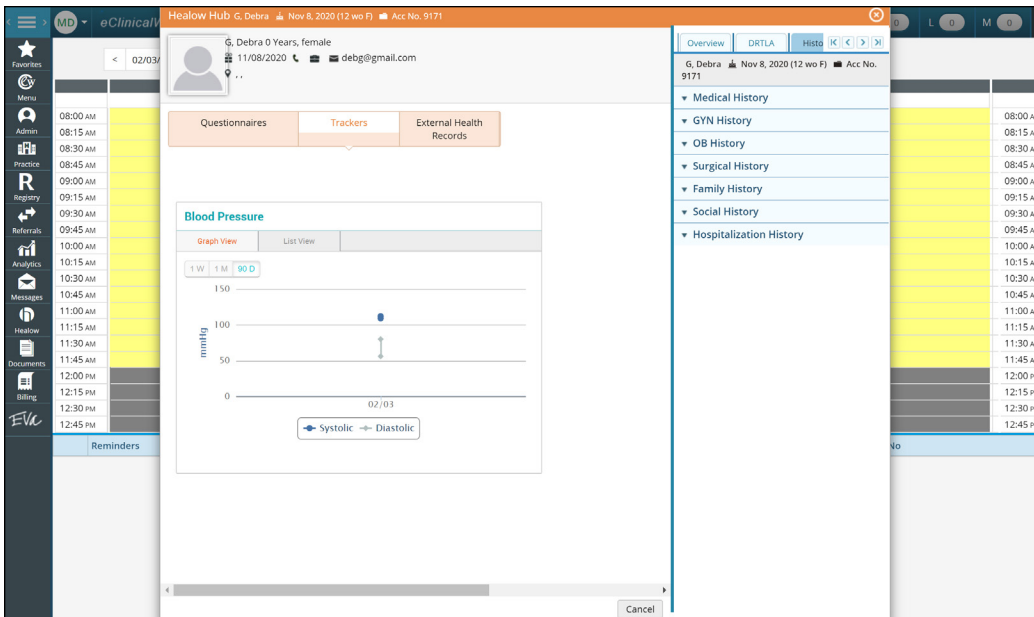
TRACK DATA DIRECTLY FROM YOUR DEVICE

FOR CLINIC STAFF:

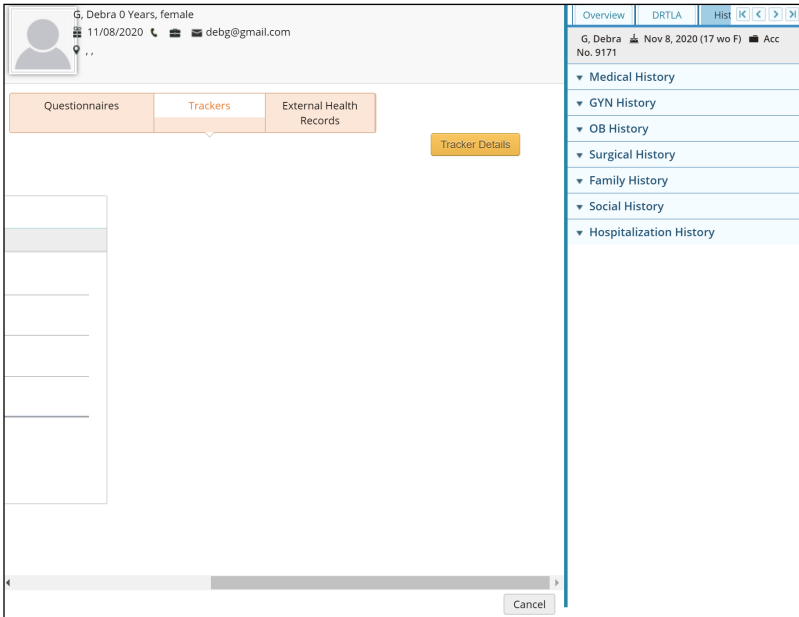
7. Healow Tracker data will show **No** until the patient has entered in their data. Click on the **No** and the next page will appear.



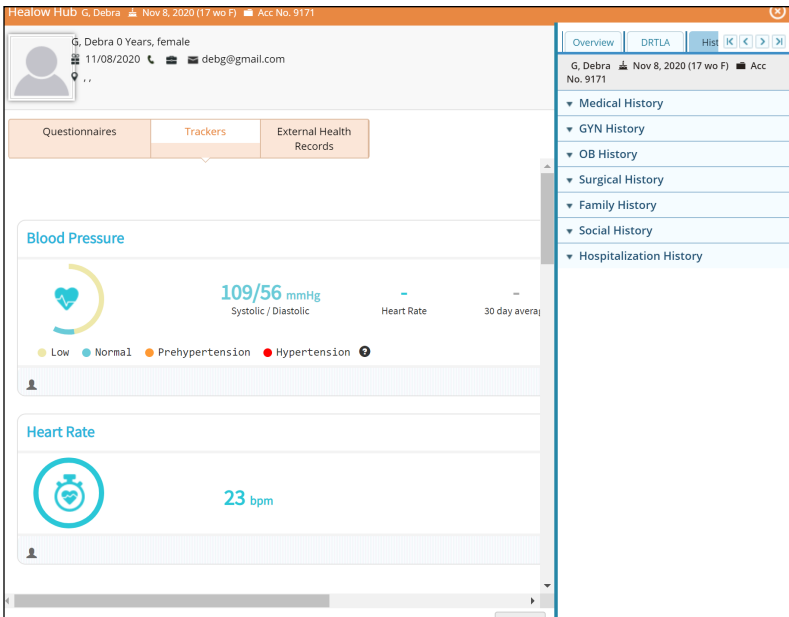
8. Below is where data is entered for each of the patient's trackers.



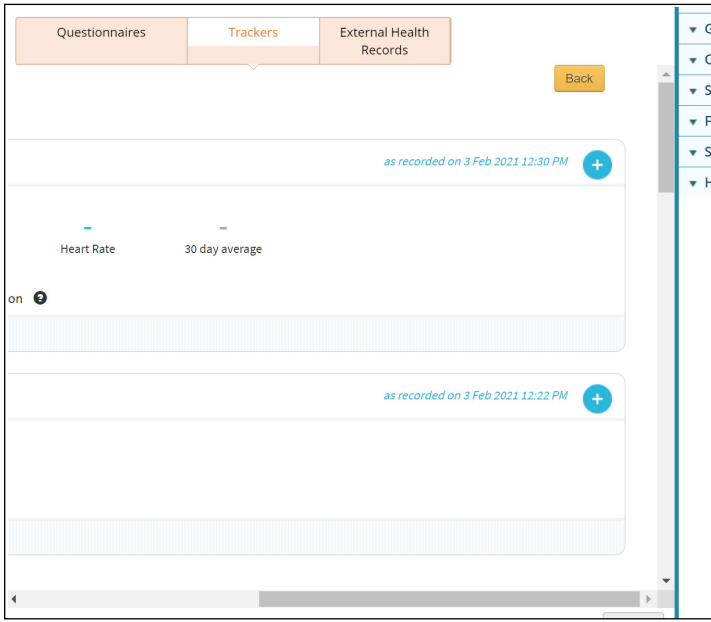
9. Scroll right and click on *Tracker Details* to see more detailed information about the patient tracker data.



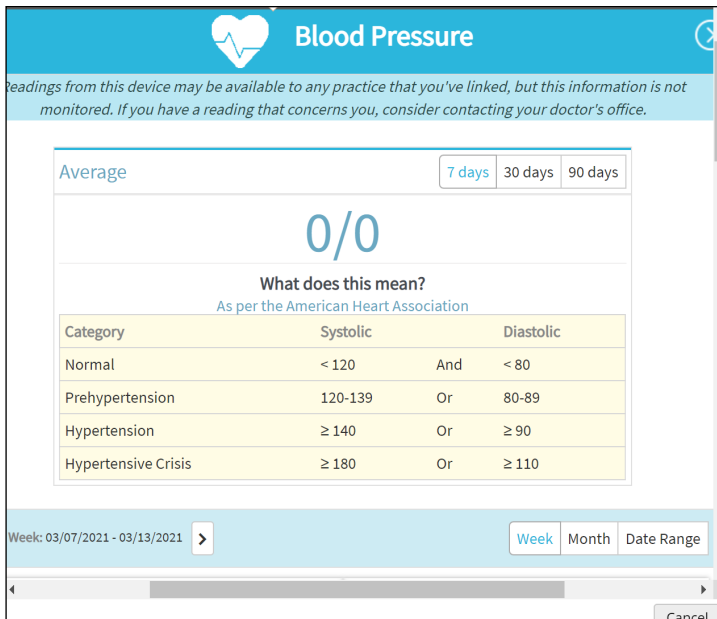
10. See patient's blood pressure and heart rate and rate it on a hypertension scale, as well as an average.



11. Scroll and click on the *Plus Sign*



12. See 7 day, 30 day, and 90 day averages.



Self-Measured Blood Pressure Monitoring (NACHC)

Patient Enrollment Orientation

Patient: _____

Date: _____

Orientation checklist will be completed upon enrollment in the self-measured blood pressure monitoring loan program.

	Confirm the patient meets the criteria for patient selection
	Instruct the patient on the loaner program and expectations of measurements
	Complete the SMBP Patient agreement
	Educate the patient on the use of the blood pressure monitor
	Teach the patient how to measure blood pressure accurately
	Demonstrate the functionality and use of the blood pressure monitor
	Show the patient how to read and understand the digital display
	Have patient re-demonstrate the application and use of the blood pressure monitor
	Provide the following handouts to the patient and review them together
	Self-measured blood pressure at home: patient information
	Self-measured blood pressure technique
	High blood pressure flow sheet
	Self-measured blood pressure flow sheet
	Fill out the "BP monitor loan log", if applicable
	Complete and have the patient sign the loaner device agreement, if applicable
	Inform patient on specifics of how they should communicate blood pressure measurements back to the office
	Document participation in SMBP program in patient medical record

Blood Pressure Monitor Loan Agreement



Patient: _____ Date: _____

Monitor Serial Number _____

I agree to the participate in the blood pressure self-management program.

- I will take my blood pressure using the monitor that I receive and will use it in the way _____ has directed me to use it.
- I will take my blood pressure every morning and every night for _____ consecutive days.
- I will record my blood pressure levels on the recording sheet provided
- I will return the completed recoding sheet and blood pressure monitor at my next visit on _____ at _____ am/pm.
- If I have any questions, I will call _____.

Your goal blood Pressure level _____ Systole
is less than _____ Diastole

Your blood pressure is too high if it is more than	Your blood pressure is too low if it is less than
 180 Systole ----- 120 Diastole	 90 Systole ----- 60 Diastole
Recheck in 1 minute. If it remains in this range, call your doctor, especially if you feel dizzy, have a headache or do not feel well.	Recheck in 1 minute. If it remains in this range, call your doctor, especially if you feel dizzy, have a headache or do not feel well.

Signature _____

Today's Date ___/___/___

REFERENCES

1. AHA, American Heart Association (2021). Health Threats From High Blood Pressure. Retrieved from Heart Attack and Stroke Symptoms: [https://www.heart.org/en/health-topics/high-blood-pressure/health-threats-from-high-blood-pressure#:~:text=Left%20undetected%20\(or%20uncontrolled\)%2C,more%20easily%20or%20even%20burst.](https://www.heart.org/en/health-topics/high-blood-pressure/health-threats-from-high-blood-pressure#:~:text=Left%20undetected%20(or%20uncontrolled)%2C,more%20easily%20or%20even%20burst.)
2. CDC, Centers for Disease Control (2021, March 16). Retrieved from High Blood Pressure: <https://www.cdc.gov/bloodpressure/measure.htm>
3. HHS, Department of Health and Human Services (2016, January). Blood Pressure Matters Keep Hypertension in Check. Retrieved from NIH News in Health: <https://newsinhealth.nih.gov/2016/01/blood-pressure-matters>
4. HRSA. (2018, August 30). Hypertension Control. Retrieved from Health Resources and Service Administration: <https://data.hrsa.gov/topics/health-centers/hypertension-control>
5. Iadecola, C., & Gottesman, R. F. (2019). Neurovascular and Cognitive Dysfunction in Hypertension. *Circulation Research*, 1025-1044.
6. NIH, National Institutes of Health (2021, March). How to Prevent High Blood Pressure. Retrieved from MedlinePlus : <https://medlineplus.gov/howtopreventhighbloodpressure.html>
7. Unger, T., Borghi, C., Charchar, F., Khan, N. A., Poulter, N. R., Prabhakaran, D., . . . Schutte, A. E. (2020). 2020 International Society of Hypertension Global Hypertension Practice Guidelines. *Hypertension*, 1334-1357.
8. Virani, S. S., Alonso, A., Benjamin, E. J., Bittencourt, M. S., Callaway, C. W., Carson, A. P., . . . al., e. (2020). Heart Disease and Stroke Statistics 2020. American Heart Association.
9. Target BP: <https://targetbp.org/patient-measured-bp/implementing/smbp-selecting-the-right-cuff-size/>
10. NACHC: https://www.nachc.org/wp-content/uploads/2020/12/SMBP-Toolkit_FINAL.pdf
11. NACHC: <https://www.nachc.org/wp-content/uploads/2018/09/NACHC-Health-Care-Delivery-SMBP-Implementation-Guide-08222018.pdf>
12. NIH: <https://pubmed.ncbi.nlm.nih.gov/32567342/>



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