

PRESSURE DROP

**From Too Much Pressure
to Pressure Drop**

**Using an RN Clinician Work Standard to
Manage Hypertension**

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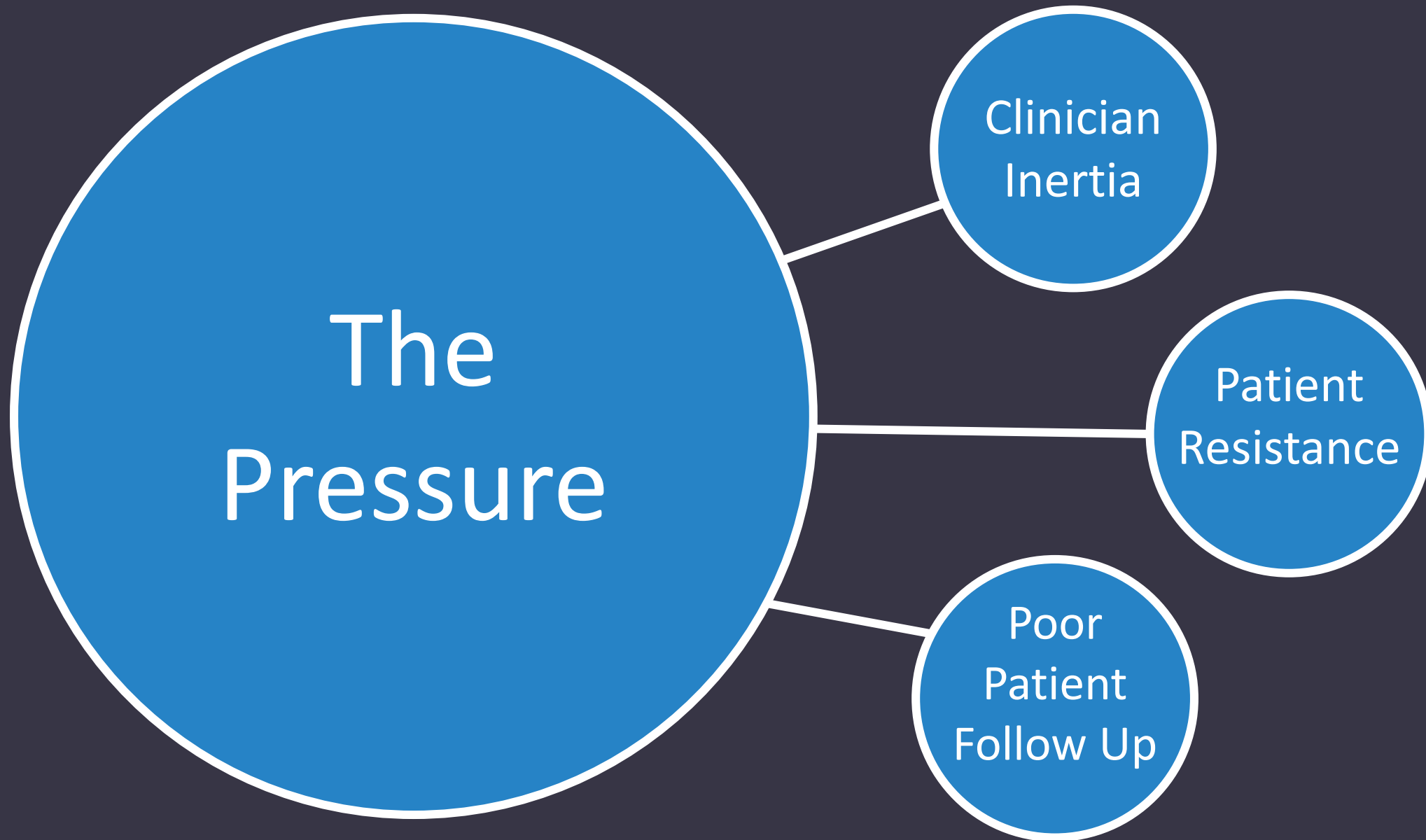
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RN Clinician Lead

SmartCare Park Nicollet Clinic



SmartCare @ Park Nicollet Clinic

- Collaborative Care Model
 - 2 MD's, 3 PA's, 1 NP, 3 RN Clinicians, 7 additional staff
- Shared Patient Panel and In Basket
- Expanded RN Clinician Role
- Focused on Risk Adjusted Total Cost of Care



Using RN Clinician Can Address All Three

Medication Adjustment Algorithm

- Initially only Lisinopril, Losartan, Hydrochlorothiazide and Amlodipine
 - Metoprolol added as almost 1/3 of patients were already on it
- Maximize doses of medications currently on before adding new medications
- If SBP > 150, make 2 changes at once
- Clinician consultation required if not in goal and taking four medication

Current Drug Name and Dosage	BP 130/90-149/89	BP 150/90- 179/109
Lisinopril 10mg	Increase to 20mg daily	Increase to 20mg daily PLUS add HCTZ 12.5mg daily
Lisinopril 20mg	Add HCTZ 12.5mg daily Continue lisinopril 20mg	Add HCTZ 25mg daily Continue lisinopril 20mg
Losartan 50mg daily	Increase to 100mg daily	Increase to 100mg daily PLUS add HCTZ 12.5mg daily
Losartan 100mg daily	Add HCTZ 12.5mg daily Continue losartan 100mg	Add HCTZ 25mg daily Continue losartan 100 mg
Amlodipine 5mg daily	Increase to 10mg daily	Increase to 10mg daily PLUS add lisinopril 10mg daily
Amlodipine 10mg daily	Add lisinopril 10mg daily* Continue amlodipine 10mg	Add lisinopril 20mg daily* Continue amlodipine 10mg
HCTZ 12.5mg daily	Increase HCTZ to 25mg daily	Add lisinopril 10mg daily* Continue HCTZ 12.5mg daily
HCTZ 25mg daily	Add lisinopril 10mg daily* Continue HCTZ 25 mg daily	Add lisinopril 20mg daily* Continue HCTZ 25mg daily
Metoprolol 50mg daily	Increase to 100 mg daily <u>if resting pulse is greater than 60</u>	Increase to 100mg (<u>if resting pulse is greater than 60</u>) PLUS add HCTZ 12.5mg daily
	<u>If resting pulse is less than 60, Add HCTZ 12.mg daily</u> continue Metoprolol 50mg daily	<u>If resting pulse is less than 60,</u> Add HCTZ 25mg daily continue Metoprolol 50mg daily
Metoprolol >50mg daily	Add HCTZ 12mg daily Continue current Metoprolol dose	Add HCTZ 25mg daily Continue current Metoprolol dose

Demographics


Me (Clinician)

PCP

Specific Clinician

Nurse

Lab

To: P SMARTCARE RN CLINICIANS 

Cc

 Pool for Responses: 

bp CHECK

TEST, JOHN L [94805628]

 This message will not be permanently saved to the patient's chart. 

 abc |   |    |  |     | 

Please contact patient for home blood pressure readings. If not done, schedule nurse visit for clinic blood pressure.


Manage Per RN BP Work Standard

Jim Welters MD
SmartCare @Park Nicollet Clinic

Flags


Dates


Delay sending until

w+2 

Due on

Date 

Expire on 

5/7/2024 

Paste follow up plan here or delete this sentence. Include provider name and DOS.

Review blood pressure medication: blood pressure medication ▾

Taking medication every day? Yes No ▾ Taken today: Yes No ▾

Home blood pressure monitoring: YES / NO ▾ Home readings: HOME BLOOD PRESSURE ▾

BP Cuff Calibration: YES/NO (Optional) ▾

R Alarm Symptoms:

Chest Pain: YES/NO (Optional) ▾

Shortness of Breath: YES/NO (Optional) ▾

Palpitations: YES/NO (Optional) ▾

Hives, Lip or Throat Swelling: YES/NO (Optional) ▾

Dizziness/Lightheadedness: YES/NO (Optional) ▾

Side Effects:

Cough: YES/NO (Optional) ▾

Leg Swelling: YES/NO (Optional) ▾

Other: htn meds s/e: no medication side effects not... ▾

Blood pressure measurement from today:

BP Readings from Last 1 Encounters:

05/06/21	1355	(!) 150/90
05/06/21	1354	(!) 150/90

Most recent lab values:

No results found for: "CREATININE"

No results found for: "K"

No results found for: "SODIUM"

No results found for: "HGBA1C", "A1CDC", "AA1C", "A1CBA", "A1CQ", "A1CQL", "HGBA1CPOC"

No results found for: "LDL", "LDLPOC"

There are no diagnoses linked to this encounter.

Follow-Up ▾

Future appointment: No future appointments.

Discussed with Clinician: YES/NO (Optional) ▾

Routed to Provider: ***

Clinician Action: Review blood pressure and pended orders. .

Clinician Next Step: Sign if appropriate. If changes, Visit RN to contact patient.

The Data to Date

Data collected from
June 2023 to February
2024

- 129 visits with 79 unique patients
 - Average 1.6 visits
 - Range of 1-6 visits

- Age Range 27-86
- Female 55%

- Most common side effects- edema, cough, lightheadedness
- No alarm symptoms, SBP >180

The Data to Date

Data collected from
June 2023 to February
2024

- Previous BP 143/88; 38% in goal
 - Med Change 59%

- 56 RN visits with BP not in range (43%)
 - Med Change 82%

- Final BP 130/80, 87% in goal
 - 67 (85%) on meds, avg. 1.9 (range 0-4)

- Medications: Hydrochlorothiazide, lisinopril, metoprolol, amlodipine, losartan, other

How Can This Be Applied In Other Areas?

- Support staff will take BP with SmartSet, then route encounter to Triage RN or Clinic RN
- Triage RN or Clinic RN will review encounter and will route to Clinician when completed with encounter.

- Can also be done via MyChart. Patients send home blood pressure readings along with any updates about their blood pressure medication.
- SmartSet is completed by support staff or RN and routed to clinician after reviewing.

High Value, low-cost, high satisfaction intervention

Reduced clinician work load

RN's practicing at top of license

Adaptable to other clinic settings

Significantly Improved BP Control



Questions?

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Thank You For Listening!