

- 1. Triage the patient as usual, to include a complete set of vital sgns (blood pressure, respirations, pulse, etc.)
- 2. If the patient's blood pressure is elevated, whether a hypertension diagnosis is documented or not, let the patient know that, but also let them know that a single elevated reading is not enough evidence to made a diagnosis; have the patient relax and sit quietly for 15 minutes. Explain briefly to the patient how blood pressure can be impacted by both internal and external stimuli, and you are checking a second reading in 15 minutes (which may occur after the patient has had an opportunity to see their provider).
- 3. If the patient is already diagnosed with hypertension, repeat vitals after 15 minutes and document them; proceed as usual with the customary workflow regarding patient evaluation(s), recommendation for medication changes, etc.
- 4. If the patient is <u>not</u> currently diagnosed with hypertension, instigate the C.H.I.L.L.I. protocol, as described below:

## THE C.H.I.L.I. PROTOCOL

Check the vital signs a second time; at least fifteen minutes after the first (Document your findings).

Is the blood pressure still elevated above 140/90 mmhg (Document your findings)? If NO, you may stop the protocol. In light of the initial elevated reading, you may wish to encourage the patient to visit their County Health Department or other local resource in order to have their BP taken a few additional times over the next several weeks. You may give them a BP monitoring card to record the results and encourage them to bring the card back with them at the time of their next visit. If YES, continue the protocol.

Let the patient know their blood pressure is still elevated and provide some brief education regarding the risk of uncontrolled blood pressure. Reassure them the results are still preliminary, and schedule or ask the patient to schedule a follow up visit in two weeks. Encourage the patient to document additional BP readings, taken at their local County Health Department, other local resource, or at home blood pressure readings, if they have a home monitor, as often as possible (daily) over the next two weeks. Ask the patient to at least get 5 blood pressure readings prior to their follow up visit. Let them know that FREE blood pressure screenings are available to them at county health departments, local drug stores, Walmart, etc.

Let the provider know. Flagging/alerting them in the EHR is great, but adding the red magnet/clip to the door as an additional visual cue is even better. This way, you are not asking the provider to rely solely on the rather, you have engaged the patient AND a visual cue to support a more diligent discussion and investigation the provider and patient.

Institute a reminder/alert mechanism to ensure that you don't lose the patient to follow up! If they no show for their next appointment, contact the patient and make another appointment.



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