

Policy/Procedure Title: Adult Blood Pressure (BP) Screening

Category: Adult Health

Effective Date: 05/12/2004 Last Review/Revise Date: 05/31/2017

Authorized and Approved by: Green County Health Director/Officer

PURPOSE:

Green County Health Department offers blood pressure screenings, recommendations for follow up, counseling and referral(s) to residents of Green County as a means of early detection of pre-hypertension and hypertension. The purpose of this policy is to provide GCHD staff guidance on the protocols for accurate BP screening and counseling, including follow up recommendations, risk factors, and lifestyle changes. GCHD is not a primary care clinic and does not manage hypertension. American Heart Association and Wisconsin Heart Disease and Stroke Prevention Program guidelines will be used.

AUTHORITY: Wisconsin State Statute 255.03-Chronic Disease Prevention, Assessment and Control

SCOPE:

Green County residents

DEFINITIONS:

Blood Pressure: The force/pressure of the blood pushing against the walls of the arteries. Blood pressure is always recorded as two numbers, where the top number is the systolic pressure and the bottom number is the diastolic number. Blood pressure may be referred to as BP.

- **Systolic blood pressure:** The pressure when the heart beats while pumping blood.
- **Diastolic blood pressure:** The pressure when the heart is at rest between beats.

PUBLIC HEALTH ESSENTIAL SERVICES:

- Monitor health status to identify and solve community health problems
- Diagnose and investigate health problems and health hazards in the community
- Inform, educate, and empower people about health issues
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable

PROCEDURE:

A. Screening

1. Blood pressure screenings are provided during adult immunization office visits and upon request. Individuals can call for an appointment with a public health nurse to have their blood pressure checked.

2. BP screenings may be offered at community events.

B. Measurement Using Sphygmomanometer and Electronic BP Machine

1. Introduce yourself.
2. Ask client to complete the Blood Pressure Screening form. (Appendix A)
3. Explain the procedure to the client.
4. Take clients blood pressure. Have the client sit in a comfortable position with back supported, legs uncrossed, and both feet flat on the floor. The arm to be used should be supported on a firm surface at heart level, with elbow slightly flexed.
5. Bare the upper arm of clothing and snugly apply an appropriate-sized blood pressure cuff. Be sure the center of the cuff bladder is over the brachial artery and the lower margin of the cuff is one inch above the antecubital space.
6. Ask the client not to talk during blood pressure measurement.
7. Using a manual BP cuff
 - a. For cuff size, refer to p. 8 of [Wisconsin Heart Disease and Stroke Prevention Program Toolkit](#).
 - b. Insert stethoscope ear pieces.
 - c. Palpate the radial pulse.
 - d. Inflate the cuff until you can no longer palpate the radial pulse. Then, inflate the cuff 30 mm Hg more.
 - e. With head of stethoscope positioned over the brachial artery in the medial aspect of the antecubital fossa, open the valve on the sphygmomanometer and release the air slowly and evenly, at about 2-4 mm Hg per second.
 - f. Note the systolic and diastolic blood pressures.
8. If this is the client's first visit, it is recommended to check blood pressure in both arms and record which arm has the highest reading and use that arm for subsequent BP reading. (This may not be feasible in community setting)
9. If the blood pressure is above the Normal Blood Pressure Classification category, you may ask client to rest a few minutes and recheck blood pressure.
10. Record on the Blood Pressure Screening Form (Appendix A) the following:
 - Blood pressure reading including arm used and cuff size (if larger or smaller than regular sized cuff)
 - Recommendations for follow-up
 - Teaching provided
 - Screener's name
11. Record and client's blood pressure reading(s) on the GCHD individual wallet sized BP record.

12. If using a validated, automated BP device, follow manufacturer recommendations for measurement of BP.
13. Record results for client on GCHD wallet record and GCHD Blood Pressure Screening Form.

C. Evaluation , Recommendation, and Counseling

1. Recommended follow up will be based on the current recommendations from the GCHD Staff Blood Pressure Guidelines and Counseling Form. (Appendix B).
The results and recommendations are based on using the BP Categories Defined by the American Heart Association.

American Heart Association Blood Pressure Guidelines

Blood Pressure Category	Systolic mm Hg *		Diastolic mm Hg*
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

*Systolic and diastolic blood pressures are independent of each other. One pressure may be normal and the other elevated; if so, this is considered an elevated reading

D. Referral Guidelines

Blood Pressure Category	1 st Visit	2 nd Visit (after elevated reading)	3 rd Visit (after one elevated and one normal reading)
Normal	Re-check in 2 years*		
Prehypertension	Schedule 2nd visit in 3-30 days**	Refer to health care provider within 2 months	Refer to health care provider within 2 months
High Blood Pressure (Hypertension) Stage 1	Schedule 2nd visit in 3-30 days**	Refer to health care provider within 2 months	Refer to health care provider within 2 months

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Blood Pressure Category	1 st Visit	2 nd Visit (after elevated reading)	3 rd Visit (after one elevated and one normal reading)
High Blood Pressure (Hypertension) Stage 2	Schedule 2nd visit in 3-30 days**	Refer to health care provider within 1 months	Refer to health care provider within 1 months
<u>Hypertensive Crisis</u> (Emergency care needed)	Immediate referral to health care provider	Immediate referral to health care provider	Immediate referral to health care provider

*For individuals already on BP treatment, check BP at least every 3 months, even if it is normal or high normal

**when possible, re-checks should be scheduled within 3-7 days

2. Hypertensive Crisis

- a. If a client has severely elevated blood pressure and/or presents with severe headache, confusion, dizziness, blurred vision, facial drooping, slurred speech, numbness in face, arm or leg, trouble walking, chest pain or shortness of breath, the nurse will call 911 immediately for ambulance transport.

3. Extremely low BP:

- a. If the patient does not experience symptoms of low blood pressure, there is no need for concern.
- b. Most doctors consider chronically low blood pressure dangerous only if it causes noticeable signs and symptoms, such as:
 - i. Dizziness or lightheadedness
 - ii. Fainting
 - iii. Dehydration and unusual thirst
 - iv. Lack of concentration
 - v. Blurred vision
 - vi. Nausea
 - vii. Cold, clammy, pale skin
 - viii. Rapid, shallow breathing
 - ix. Fatigue
 - x. Depression

REFERENCES:

American Heart Association

Wisconsin Heart Disease and Stroke Prevention Program BP Measurement Toolkit

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