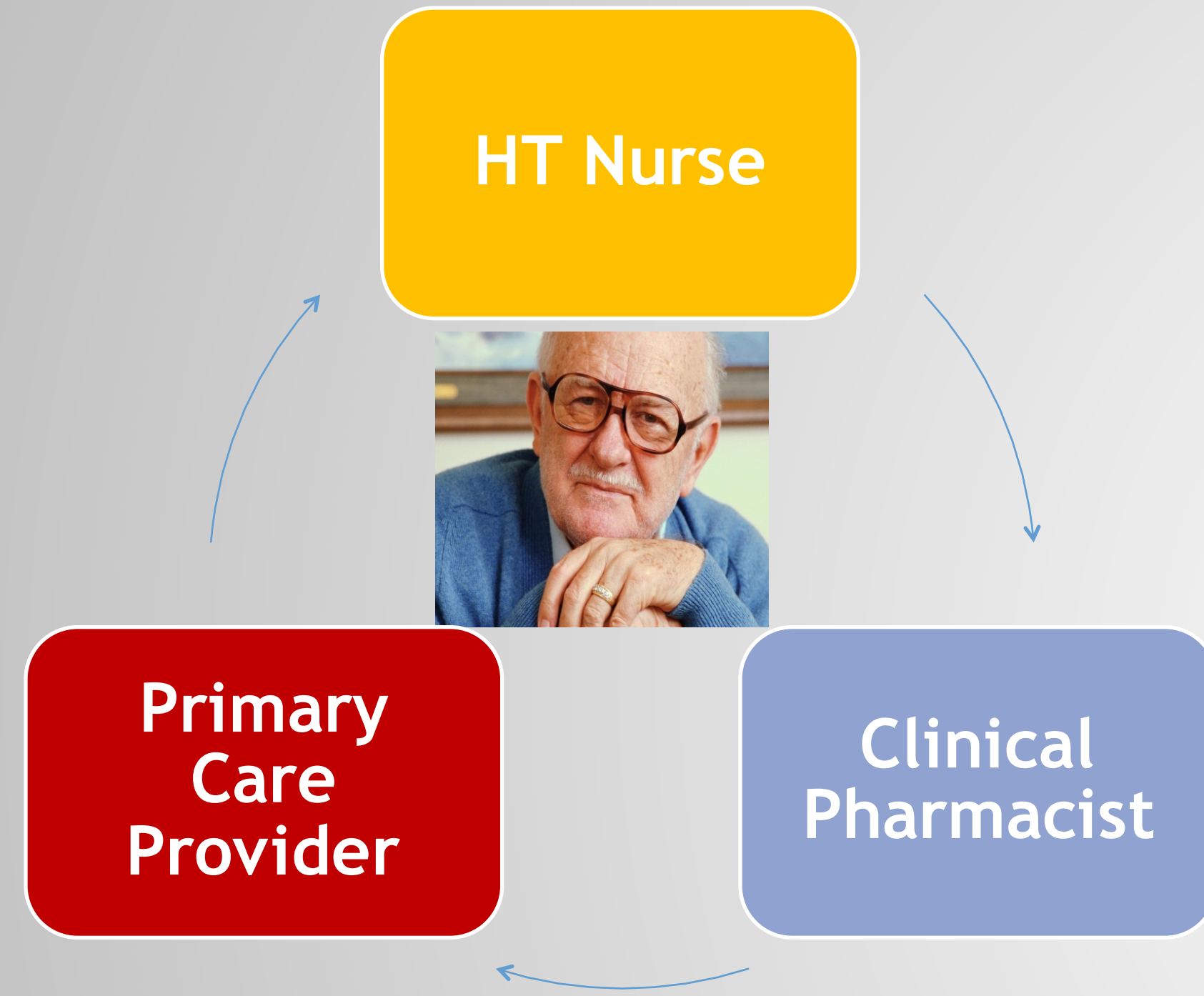
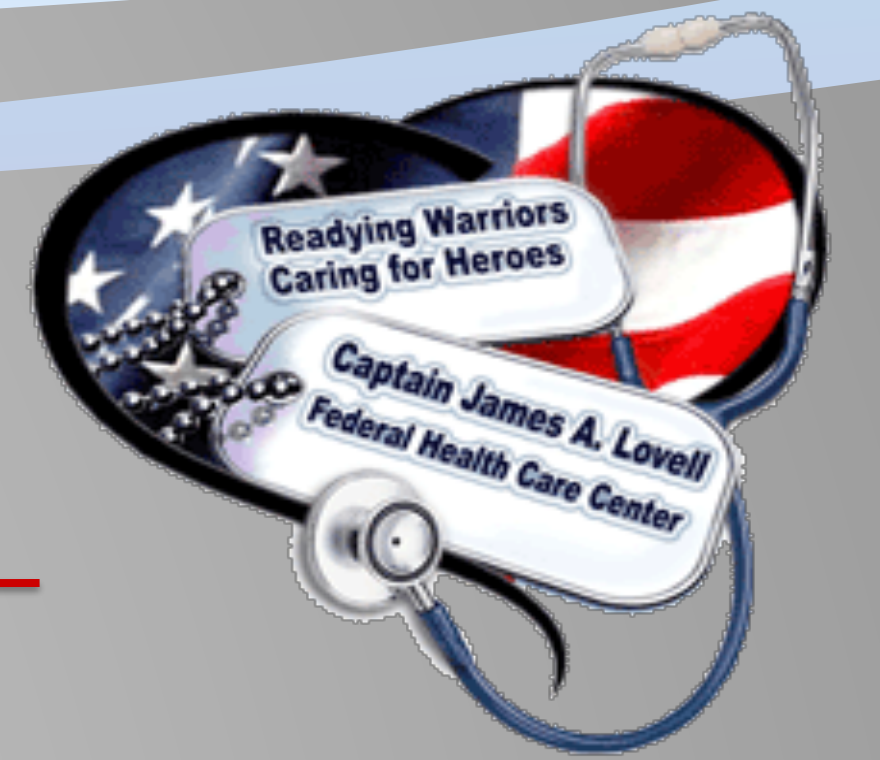




# Designing a Nurse and Pharmacist Hypertension Management Clinic in the Home Telehealth Veteran Population

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- ### HT RN Roles
- Assess and monitor transmitted blood pressure readings
  - Provide medication education
  - Offer lifestyle modification coaching
  - Ensure that veterans receive appropriate and timely care
  - Collaborate with other members of the interdisciplinary team
  - Identify available resources to meet veteran needs

### Referral Criteria

- [Redacted]
- Enrolled in HT for HTN
- Not currently managed by a clinical pharmacist
- Uncontrolled BP despite nursing interventions
- Transmit BP readings 5 or more per week
- Have 3 or more elevated BP readings in 1 week
- Have 1 or more episodes of symptomatic hypertension
- Have 1 or more episodes of symptomatic hypotension
- Experienced an adverse drug reaction

### Clinical Pharmacist Roles

- Add to or titrate current medication list to effective/tolerable dose
- Address adherence and compliance with every veteran encounter
- Base medication decisions on VA/DoD HTN Management Guidelines, clinical judgement, and individual care

### Transmission Modalities in the Patient's Home



Messaging device



Telephone



Secure browser

### Problem/ Solution

Home Telehealth (HT) nurses have a limited scope, preventing them from initiating, titrating, and adjusting medications for veterans enrolled in the program for hypertension. This constraint stalls care and incites an alternative treatment model, as uncontrolled hypertensive veterans are referred to their primary care providers for medication adjustments. The HT team and clinical pharmacists collaborated to create a hypertension clinic to manage veteran BPs judiciously.

