**Background**

The current VACIHCS's blood pressure policy was not supported by evidence based practice. It was questioned if a third manual recheck was needed when there was an elevated reading ≥ 140/90, and if a ten minute wait was actually required between readings. Current policy guidelines: All clinics will manage blood pressures at or greater than 140 systolic or 90 diastolic as follows:

- If BP ≥140/90, recheck after resting 10 minutes.
- If BP remains ≥ 140/90 with second BP, recheck a third time with a manual BP cuff.
- If BP continues to be ≥ 140/90 after third recheck, notify the provider.

**Evidence**

Evidence supports that there is only a need for a one minute wait between readings. A repeat reading is necessary when the BP reading is ≥ 140/90. The third manual recheck will be left in place as heart arrhythmias are best detected with manual readings. It was discovered that many discrepancies happen due to the practitioner not following correct procedure.

**Practice Change**

- Re-education of nursing staff on correct BP measurement procedure may help reduce the amount of elevated readings.
- The new one minute wait between readings may improve nursing staff's workflow when rechecking elevated BPs.
- We are not changing the third manual recheck due to the evidence that support that need for this to potentially catch heart arrhythmias.

**Evaluation**

- Monitor improved rate of BP rechecks as seen in the Almanac.
- All nurses will self assess at competent or above on competencies.
- A decrease in the amount of patients with BP readings of ≥ 140/90 as recorded in the VA Almanac scores.

**Future Plans**

- Expand the practice hospital wide
- Encourage staff to accurately document
- Discover a system in which the BPs in both arms are taken during a visit and use the arm with the higher reading for future visits

**References**