

INSTRUCTIONS to SET UP BLOOD PRESSURE SCREENINGS

We encourage you to use these documents as an easy resource for setting up and managing Blood Pressure Screenings in your community. These documents were revised in January 2018 and contain the latest updates recommended by the American Heart Association and the American College of Cardiologist released November, 2017.

Please note all wording with blue lettering contains hyper-links to American Heart Association Guidelines and Resources. Simply hover over the blue word(ing) until the small hand appears, then click to activate the link.

These documents are both printable and meant to be used electronically to connect to resources contained within the hyper-links. If you have a smart phone, electronic note pad or computer you can review the links with your client during your BP screening. Feel free to email the BP half sheet to your clients in addition to printing hard copies. Be sure to review with them how the hyper-links work.

STEPS TO SETTING UP A BLOOD PRESSURE SCREENING IN YOUR FAITH COMMUNITY

FIRST STEPS

- Review the 2017 updated blood pressure standards from the American Heart Association and the American College of Cardiologist (AHA/ACA) [here](#).
- Utilize the American Heart Association (AHA) Web site [here](#) for blood pressure resources and appropriate teaching material to share with your congregation
- Check with the American Stroke Association (A Division of AHA) for continuing education programs on STROKE for health professionals

WRITE A BLOOD PRESSURE SCREENING POLICY FOR YOUR CHURCH

Sample: Policy Statement – In accordance with the *American Heart Association and the American College of Cardiologist 2017 Guidelines*, this blood pressure screening procedure will provide documentation, evaluation, referral and follow-up for clients who participate in the screening.

Goals:

1. To detect persons with undetected elevated blood pressure and assist their entry into the health care system.
2. To monitor the pressures of those who are already aware of their elevated blood pressure and undergoing treatment in order to continue to control their blood pressures.
3. To actively decrease the incidence of heart attack, heart failure, cerebral vascular accident, and kidney disease, through accurate screening and referral.
4. To facilitate education and opportunity for participant self-responsibility through the screening process.
5. To provide an ongoing record for the participant on a monthly, bi-monthly or quarterly basis.

STEPS TO SETTING UP A BLOOD PRESSURE SCREENING IN YOUR FAITH COMMUNITY

Procedure:

1. Equipment needed
 - Private, quiet screening area
 - Adult regular, large, and child blood pressure cuffs
 - Stethoscope
 - Copies of: *“Blood Pressure Sign-in Sheet”*, *“Blood Pressure Screening Individual Participant Record”*, *“Blood Pressure Data Collection Summary”* and *“Blood Pressure Half Sheet Handout”*
 - Printed education materials
2. Client’s preparation to have their blood pressure taken
 - No smoking, caffeine intake or exercise 30 minutes before blood pressure reading
 - Sit still in the 5 minutes before your blood pressure is taken
 - Sit upright, back straight with feet flat on the floor
 - Don’t talk during the blood pressure reading
3. Obtaining a reading
 - Obtain a brief history including current medications and document on the appropriate record; have the client sign the *“Blood Pressure Sign In Sheet”*
 - Choose the appropriate arm, check both arms if this is the first reading you have done on this person, do not use an extremity affected by a dialysis fistula, lymph problems, a mastectomy or a previous stroke
 - Support the forearm at the level of the heart and make sure the arm is bare, even thin clothing or a tightly rolled up sleeve can cause a distorted reading
 - Use a cuff with a cuff bladder length 80% of arm circumference and width at least 40% of arm circumference
 - Palpate the brachial artery, inflate the cuff 30mm above the point the pulse is not palpable and then release to listen to reading
 - Wait one minute and retake, average readings
4. Documentation
 - Complete appropriate documentation, the blood pressure form is completed and signed by the nurse. The client needs to acknowledge they have understood the readings and any follow-up instructions. See B/P sign-up sheet – *“I understand that my blood pressure is being taken for screening purposes only. I should report any abnormal or unusual findings to my physician”*.
 - The Blood Pressure Screening form is maintained in the Faith Community Nurse’s locked file cabinet or secure web-based electronic health record
 - Blood pressure readings may be recorded on a client data card
 - Tally results of screening for health team and submit the *“Blood Pressure Data Collection Sheet”* to the Alaska Faith Community Nurse Resource Center at Providence.

* Follow-up on abnormal readings, applying 2017 ACC/AHA Guidelines and Recommendations. If a B/P is read as "Hypertensive Crises," send client to emergency room, urgent care, or call 9-1-1 as appropriate to the situation. Consult with another health care team member, if appropriate.