

CP 4.5: Blood Pressure Monitoring

Updated:
Reviewed:

Purpose

- To provide guidelines for monitoring of patients with suspected or actual hypertension
- To assist the health care team in diagnosis of hypertension or to evaluate effectiveness of treatment for hypertension

Policy Statements

In response to a referral from a health authority or primary health care provider, the Community Paramedic (CP) will follow the monitoring guidelines as outlined below when a request for Blood Pressure Monitoring is made on the Request for Service form and care plan.

Procedure

1. **OBTAIN** and **REVIEW** patient’s health history and care plan prior to appointment.
2. **REFER** to Request for Service form and care plan for direction with respect to assessments requested and acceptable blood pressure (BP) ranges for systolic and diastolic BP.
3. **OBSERVE** patient’s physical state/general well-being. Ensure patient has voided their bladder, and that they are sitting quietly and relaxed for at least 2 minutes with both feet flat on the floor with their arm outstretched and supported at heart level. If patient is bed-bound, have him/her lay face up in bed with arm supported and no contact between cuff and bed or patient.
4. **For orthostatic hypertension evaluation: MEASURE** BP in lying (L) position and then immediately on standing (Std), report to primary care provider if systolic drops greater than 20 mm Hg or if patient is symptomatic. If patient complains of dizziness when going from lying (L) to sitting (S) take and record BP. Do not proceed to standing
5. **MEASURE** blood pressure: for each BP recording, at least 2 consecutive measurements, at least 2 minutes apart, should be taken. Additional measurement should be taken when the first 2 measurements are quite different. Record the last 2
 - **Monitoring Schedule: timing, frequency and duration**
 - **MEASURE** BP twice daily (morning and late afternoon, prior to antihypertensive medications if patient on any) at about the same times every day or every other day for 6 to 7 measurements over 2 weeks
 - **RECORD** readings on BP Monitoring Log
 - **CALCULATE** average of readings, ignoring the 1st day
6. **REPORT** readings to Health Care Provider if outside acceptable ranges as per care plan

Documentation

RECORD date, right (R) or left (L) arm, time, BP, pulse (P), patient position (S or L) or any changes in position (L → Std), and patient symptoms in log.

NOTIFY primary health care provider of findings and any concerns.

Example documentation on log:

Date	Limb & Position	Morning		Symptoms	CP Initials	Limb & Position	Late afternoon		Symptoms	CP Initials
		#1	#2				#1	#2		
orthostatic evaluation example	R arm L → Std	1015 (L) 152/92 P 60	1016 (S) 120/90 P 60	Dizziness (std not done)	PD					
BP monitoring example	L arm S	1000 152/90 P 70	1005 148/88	none	PD	L arm S	1600 138/84 P 66	1604 138/88	none	PD

