

Hypertension Planned Visit

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Background & Significance: Hypertension (HTN) is a common chronic condition treated by family physicians. It is associated with an increased risk of coronary artery disease, heart failure, myocardial infarction, chronic kidney disease, cerebrovascular events and death. Treatment of the disease is associated with reduced incidence of associated conditions and mortality.¹

Problem Statement: To decrease the number of PUH at Family Medicine division of MCHC within the period of 04/2017-04/2018 compared to the year before by at least 50%.

Methods: Family medicine residents were polled at the start of the project to determine interventions to decrease PUH. A customization of the electronic medical record (EMR) to aid during the HTNPV was recommended. Flowsheets and folders tailored to HTN with pertinent labs, diagnostic workup, medications, follow-up intervals and patient education material were created based on the AAFP HTN METRIC recommendations. A session to educate the providers on the EMR customization was held. PUH was defined using JNC-8 criteria and those identified were scheduled for a HTN PV.

Outcomes: An initial chart review showed 556 PUH at baseline. Preliminary data review of PUH reports a drop in the number PUH from 556 patients in 2017 to 241 patients in 2018. Final analysis currently underway

References: 1. Qaseem, Amir, et al. "Pharmacologic Treatment of Hypertension in Adults Aged 60 Years or Older to Higher Versus Lower Blood Pressure Targets: A Clinical Practice Guideline from the American College of Physicians and the American Academy of Family Physicians." *Annals of Internal Medicine*, American College of Physicians, 21 Mar. 2017, annals.org/aim/fullarticle/2598413/pharmacologic-treatment-hypertension-adults-aged-60-years-older-higher-versus.