VHA PROSTHETIC CLINICAL MANAGEMENT PROGRAM (PCMP)

CLINICAL PRACTICE RECOMMENDATIONS
BLOOD PRESSURE MEASURING DEVICES

I. Background

VHA's Prosthetic and Sensory Aids Service Strategic Healthcare Group was directed by the Under Secretary for Health to establish a Prosthetic Clinical Management Program (PCMP). The objectives are to coordinate the development of recommendations for prosthetic prescription practices and contracting opportunities to assure technology uniformity and ease of access to prosthetic prescriptions and patient care that will lead to valid outcome measures and analysis for research purposes.

A work group with input from selected clinicians convened to recommend a policy regarding selection of blood pressure monitoring devices.

Blood pressure measurement is an important indicator of the current clinical condition of patients and a powerful predictor of future cardiovascular and overall health. There is a large market for blood pressure measuring devices not only in clinical medicine but also among the public where the demand for self measurement of blood pressure is growing rapidly.

II. Policy

The purpose of these clinical practice recommendations is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost-effective prescribing.

III. Clinical Practice Recommendations/Medical Criteria

A. In order for VA to provide a veteran with a blood pressure cuff for use at home, the following criteria must apply:

Patient Participation

1. Veteran is willing and interested in participating in the home measurements and recording and conveying the same to his VA health care team or has a surrogate who is willing and able to

do so. Must be willing to record blood pressure reading at least once a day for at least six weeks.

2. Veteran is able to have demonstrated the ability to measure blood pressure correctly using the blood pressure monitoring device after instruction or has a surrogate who is able to do so.

Clinical Participation

Documented hypertension in the VA medical record and veteran's anti-hypertensive medication is being adjusted or anti-hypertensive medication is being adjusted and there are concerns about changes in the veteran's blood pressure.

B. The following medical criteria are optional:

Patient Participation

Some patients experience higher blood pressure readings when observed by providers in a health care setting. This is commonly called "white coat hypertension" to imply that the providers are in part causing the higher reading, by making the patient nervous. It is seen in home blood pressure readings that these also can be higher for the first month or so, presumably due to nervousness and putting the cuff on too tightly. Patients for whom providers have suspected a role for "white coat hypertension" may be issued home devices as a means to ascertain their real blood pressure more accurately, and thereby to avoid overmedication.

Clinical Participation

1. VA providing anti-hypertensive medications.

2. Healthcare provider feels that patient compliance would improve by greater participation and linkage between treatment program compliance and blood pressure recordings.

3. Veterans participating in a cardiac or pulmonary rehabilitation program through the VA.

C. Special attention should be paid to:

1. Diabetics whose blood pressure must be maintained at <135/85.
2. Patients with CHF in whom afterload reduction may improve cardiac function.

3. Patients with elevated creatinine in whom improved blood pressure control may delay or eliminate the need for end-stage renal disease care.
4. Patients with history of cerebrovascular infarction or myocardial infarction.

D. In general, home blood pressure cuffs would not be provided to:

1. An individual patient more than twice without return of the original device.
2. For patients who do not fill their prescriptions for anti-hypertensive medications.

E. Prior to receiving a blood pressure monitor:

1. Veteran and/or caregiver will receive documented instruction on use of the device.

2. Veteran will be fitted for correct cuff size.

IV. Applicable Literature

a. O'Brien, Eoin; Waeber, Bernard; Parati, Gianfranco; Staessen, Jan; Myers, Martin G. on behalf of the European Society of Hypertension Working Group on Blood Pressure Monitoring. Blood Pressure measuring devices: recommendations of the European Society of Hypertension. BMJ Volume 322; 3 March 2001

b. Bortolotto, LA; Henry O, Hanon O, Sikias P., Mourad, JJ, Girerd, X. Department of Internal Medicine, Hospital Broussais, Paris, France. Validation of two devices for self-measurement of blood pressure by elderly patients according to the revised British Hypertension Society protocol: Omron HEM-722C and HEM-735C. National Library of Medicine, Blood Pressure Monitoring 1999 Feb;4 (1):21-5.

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Date: 3/15/02