

EQIPP: Hypertension (Generalist)

Data Collection Tool

Pull 25* charts for children ages 4 years and older that have been in the practice's care for one year or more.

- The child should have been seen at least two times (one of them being a well-child check).
- Try to select charts that represent children from different age groups (e.g. "X" number of charts of children between ages 4 and 7 and "X" number of charts of children between ages 7 and 10)

Review all documentation related to assessment of the child's blood pressure and or care of hypertension within the last 18 months. This review is a retrospective look at the care provided.

Answer the questions based on actual documentation, not on memory or inference.

Document the Measurement of Blood Pressure

1. At the most recent *well-child visit*, was the child's blood pressure measurement documented in the medical record?

☐ Yes ☐ No

IF NO: DATA COLLECTION ENDS HERE

Interpret Blood Pressure Measurement

2. What is the blood pressure classification at the most recent well-child visit (See 2017 Clinical Practice Guidelines, Tables 2 and 3)?

☐ Normal ☐ Abnormal (≥ 90 percentile for height, age and gender)
☐ Unable to classify due to missing height (patient less than 13 years of age)

UNABLE TO CLASSIFY DUE TO MISSING HEIGHT: DATA COLLECTION ENDS HERE

2a. If Abnormal, was the blood pressure measurement *repeated* (reaffirming correct cuff size, patient positioning, etc.) keeping in mind the standard for appropriate blood pressure measurement?

☐ Yes ☐ No ☐ NA, due to reason for blood pressure to be high (e.g., pain, crying, etc).

Discuss Lifestyle Behaviors

3. Were patient lifestyle behaviors aimed at maintaining a normal blood pressure (for example nutrition, physical activity, smoking and/or smoke exposure) discussed with the patient and/or guardian?

☐ Yes ☐ No

NORMAL CHARTS: DATA COLLECTION ENDS HERE

Confirm the Diagnosis of Hypertension

4. Was the blood pressure *repeated* in the office (reaffirming correct cuff size, patient positioning, etc.), during 1 or more subsequent office visits?

☐ Yes ☐ No

4a. If yes, was blood pressure measured by auscultation?

☐ Yes ☐ No

5. Was Ambulatory Blood Pressure Monitoring (ex. 24-hour blood pressure monitoring) used in accordance with the 2017 Clinical Practice Guidelines (Table 7) to further assess blood pressure?

☐ Yes ☐ No ☐ No ABPM available ☐ NA ABPM not recommended

5a. If no, was the reason documented in the patient chart?

☐ Yes ☐ No

EQIPP: Hypertension (Generalist)

6. Did the patient return within the [recommended timeframe](#) (See 2017 Clinical Practice Guidelines, Table 11)?

- ☐ Yes ☐ No

6a. If no, was a reminder made (i.e. mailed card or phone call) to the patient/family?

- ☐ Yes ☐ No ☐ NA – Timeframe has not elapsed

IF “No” TO QUESTION 6: DATA COLLECTION ENDS HERE

7. After follow up BP measurements, was a diagnosis of hypertension or elevated blood pressure confirmed for this child?

- ☐ Yes ☐ No, the child's blood pressure is within a normal range
☐ No, no blood pressure readings taken

DATA COLLECTION CONTINUES ONLY if “Yes” is selected for 7

Evaluate for Identifiable Causes and Comorbidity Associated with Hypertension

8. In children and adolescents being evaluated for elevated blood pressure or hypertension, was a targeted patient and family history (includes but not limited to history of early cardiac events and familial hypertension) documented in the medical record?

- ☐ Yes ☐ No

9. If the child or adolescent was found to have elevated blood pressure or hypertension (Stage 1 or Stage 2), was a targeted physical examination performed looking for secondary causes (See 2017 Clinical Practice Guidelines, Table 12)?

- ☐ Yes ☐ No

10. Were upper and lower extremity blood pressure measurements performed?

- ☐ Upper only ☐ Lower only ☐ Both upper and lower extremities

11. Was [appropriate diagnostic](#) testing obtained after confirmation of diagnosis of hypertension (See 2017 Clinical Practice Guidelines, Table 13, 14, 15)?

- ☐ Yes ☐ No ☐ Some test(s) ordered, but not appropriate

Develop a Treatment Plan

12. Was a written management plan (including non-pharmacologic and pharmacologic measures as appropriate) provided to the patient/family?

- ☐ Yes ☐ No

13. If Stage 2 – Hypertension, was the patient referred to a subspecialist?

- ☐ Yes ☐ No ☐ NA, not Stage 2-HTN ☐ NA, managing myself
☐ NA, no subspecialist available

EQIPP: Hypertension (Generalist)

Appendix – Definitions

Recommended Timeframe

Within 6 months for elevated BP. Within 1-2 weeks for Stage 1 hypertension. Referral to a subspecialist within 1 week for Stage 2 hypertension.

Appropriate Diagnostic Testing

Appropriate diagnostic testing includes focusing on determining possible causes and/or comorbidities associated with hypertension and includes detailed patient history, family history, physical examination, laboratory evaluation, and imaging.