

ACCURATE BLOOD PRESSURE RECORDING: “TAKING THE FIRST STEPS TOWARDS ACHIEVING RENAL ASSOCIATION STANDARDS”

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PROBLEM: It is well documented that cardiovascular disease in the dialysis population poses a significant health risk and premature death. The management of hypertension must be undertaken with the knowledge that blood pressure recording has been accurate in accordance with British Hypertension Society (BHS) Guidelines.

PURPOSE: Review current practice of blood pressure (BP) measurement within the chronic haemodialysis setting. Identify potential practice gaps. With the view to the development of a clinical work instruction which is evidence-based for implementation into an existing quality management system. Thus ensuring standardised practice, thereby providing physicians with a platform on which to base anti-hypertensive strategies.

DESIGN: A self-completion questionnaire was developed based upon BHS and Association for the Advancement of Medical Instrumentation (AAMI) guidelines, incorporating procedures for BP measurement and the models of sphygmomanometers used.

FINDINGS: Review of current practice identified a variety of sphygmomanometers in use within the chronic haemodialysis setting. Evidence was also identified which related to varying methodologies of BP measurement. This supported the need to develop a standardised work instruction for use in the clinical environment.

CONCLUSION: This small study has culminated in the development of a step by step BP clinical work instruction. A training strategy is currently in process to ensure dissemination of the new standard. Audit of the application of this standard will be undertaken through the quality management system. We recommend that purchase of new sphygmomanometers be in accordance with AAMI standards.

RELEVANCE: Review of current practice coincided with the publication of the 3rd edition of the Renal Association Standards, achievement of BP targets pre & post dialysis will prove problematic if standardised measurement and instrumentation are not promoted.