

## Pharmacist Management of Uncontrolled Hypertension

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Patients were referred to the clinical pharmacist by primary care providers for the management of uncontrolled hypertension as evidenced by a persistent blood pressure greater than 140/90 mm Hg. Patients met with the clinical pharmacist for 30 minutes every 6-8 weeks for medication counseling, monitoring, and management. The primary endpoints were percent of patients achieving blood pressure goal at clinic discharge compared with standard primary care and mean change in blood pressure from baseline to discharge. Secondary endpoints were utilization of antihypertensive agents at baseline compared to discharge, and frequency and types of interventions made by the clinical pharmacist. A

significantly larger portion of patients reached blood pressure goal in the pharmacist managed clinic (78.6%) versus standard primary care (46.3%). Clinical pharmacists can effectively manage hypertension in patients referred by their primary care provider due to poor blood pressure control.

*This initiative addresses Goal #2 of the ASHP 2015 Initiative.*

### QUALITY IMPROVEMENT TOOLS

- [JNC VII](#) (PDF)
- [HTN Management Algorithm](#) (PDF)
- [VHA Clinical Practice Guide For Diagnosis and Management of Hypertension in the Primary Care Setting](#) (PDF)
- [The Pharmacologic Management of Hypertension: Supplement to VHA/DoD](#) (PDF)

These "2015 Success Stories" highlight successes in implementing one of the ASHP [2015 Objectives](#). Tools and resources are also provided for each success story. For more information, email [2015@ashp.org](mailto:2015@ashp.org) or send your "Success Story" accompanied by a [permission form](#) (PDF).