

Surrey Heartlands Locally Commissioned Services 2024

SHLCS-A05-2024-ABPM	Ambulatory 24 hr Blood Pressure Monitoring (ABPM)
KEY ELEMENTS	<p>Aims</p> <ul style="list-style-type: none"> ➤ To support the accurate diagnosis of hypertension ➤ Avoid unnecessarily labelling patients as hypertensive. ➤ Avoid unnecessary prescribing of anti-hypertensive medication. ➤ Better identify patients at increased cardiovascular risk because of hypertension. <p>LCS intended to support provision of ABPM for patients:</p> <ul style="list-style-type: none"> ➤ With clinic blood pressure between 140/90mmHg and 180/120mmHg ➤ Monitoring of patients considered to have a “white coat” effect on their BP. ➤ Evaluation of drug-resistant hypertension if considering onward referral to secondary care ➤ Evaluation of symptomatic hypertension if considering onward referral to secondary care
OF SPECIAL NOTE	<p>Exclusion criteria; using ABPM for the purposes of:</p> <ul style="list-style-type: none"> ➤ Informing equivocal hypertension treatment decisions determining efficacy of drug treatment over 24h ➤ The diagnosis and treatment of hypertension in pregnancy (refer to specialist) ➤ <i>For the avoidance of doubt, patient home BP readings are not covered by this LCS.</i>
RISKS	<ul style="list-style-type: none"> ➤ Consider signed Patient Agreement for return of equipment – non-return of equipment causes onward delays ➤ With their own BP scheme, pharmacies may refer multiple patients for 24h ABPM ➤ Waiting list may be needed
PRACTICE CONSIDERATIONS	<ul style="list-style-type: none"> ➤ Patients referred to the service should ideally be seen within 6/52 (unless clinical need indicates they need to be seen sooner) ➤ First appointment to have ABP device fitted with full instructions given to the patient. ➤ Second appointment for removal of device ➤ Average (of at least 14 waking hours measurements) is recorded. ➤ FU to discuss results should be offered with a suitably qualified clinician, ideally within 2/52. ➤ (NB Management of hypertension is GMS and therefore not funded through this LCS)
PRICING:	<ul style="list-style-type: none"> ➤ £42.66 per patient ➤ Quarterly claims