

Explanation of TUPD Checklist

Create a relationship: According to an NCPA study, the #1 predictor of adherence is the patient provider relationship. Find a way to strike up a conversation with the patient and get to know them so that they feel comfortable in talking to you.

Home blood pressure monitoring: Pick a fully automatic BP meter from your stock as your go to meter and teach your staff how to train patients who want to buy one.

BP monitoring technique: Good technique is imperative and having mastered that the patient should monitor in the morning first thing and again just before the evening meal. They can do this 2-3 times a week to look at trends.

******BP monitoring tips for patients:** Have them take 2-3 readings separated by less than a minute each time they wish to know their blood pressure level. There is good information stating a downward trend in BP with two to three successive readings. Patients will often see a higher reading the first time and significantly lower levels on the next readings. You can tell them to average the three readings for the true level....or throw out the first one and average the next two.

BP monitoring caveats: If a provider wants to “check out” the patient’s BP monitor, they will need to use proper technique AND they will need to take a series of several readings with each device for a true comparison. I find this is not usually done.

Medication talk: Patients do better if they know what they are taking, why they are taking it, how to best take it, and what to expect from it. They also may do better with a simplified regimen requiring less frequent dosing. Make the timing of their medication fit into their lifestyle and not the other way around.

DASH and other diet talk: Make it simple, it’s really all about increasing fruit and vegetable intake, decreasing high fat, junk, and fast foods. Challenge them to eat 5 or more servings of fruits and veggies a day and also try that yourself. Advise them to keep a daily log for a week or so. The logbook can be very revealing to folks when they look back at their eating habits.

Smoking: dphhs.mt.gov/publichealth/mtupp/quitline