Community Pharmacy Surrey & Sussex

Community Pharmacy NHS Hypertensive Case Finding Service

This paper explains how the free NHS Hypertensive Case Finding Service is carried out in a community pharmacy.

1. Identify who can use the service

- The service can be offered to adults aged 40 or over who do not already have a diagnosis of high blood pressure.
- People aged under 40 may be offered the service at the discretion of pharmacy staff, for example if they have a family history of high blood pressure.
- Patients over the age of 18 years old may also be referred by their GP practice for a clinic blood pressure check or ambulatory blood pressure monitoring.
- The service cannot provide monitoring or repeated blood pressure checks for patients.

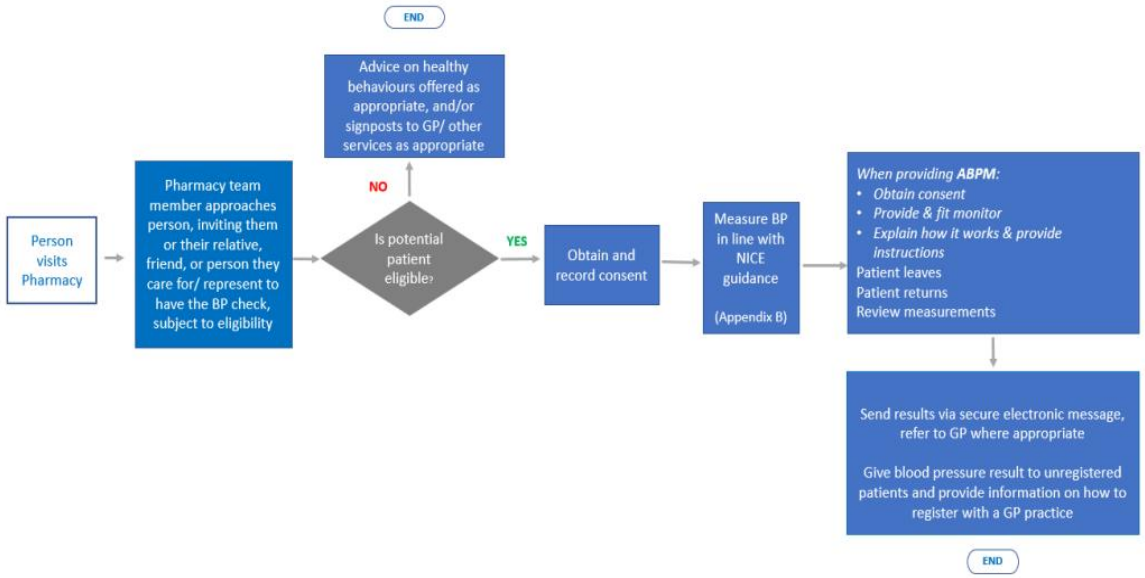
2. Check whether the person is suitable. The patient is asked:

- To confirm they are not already having their blood pressure regularly monitored by a healthcare professional.
- That they do not need daily blood pressure monitoring.
  To confirm they do not have atrial fibrillation or a history of irregular heartbeat.

3. Explain the service and gain consent

- What the blood pressure check involves.
- The person's consent before starting.

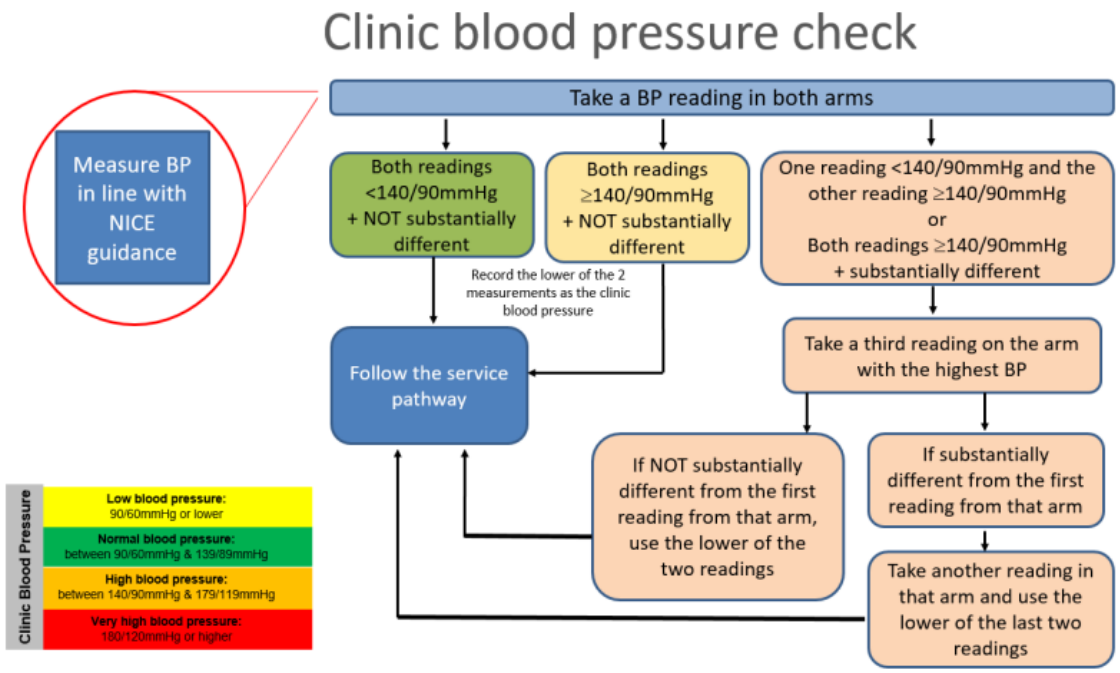
Annex A: Blood pressure check process flowchart



4. Measure the clinic blood pressure reading. NICE guidance is followed.

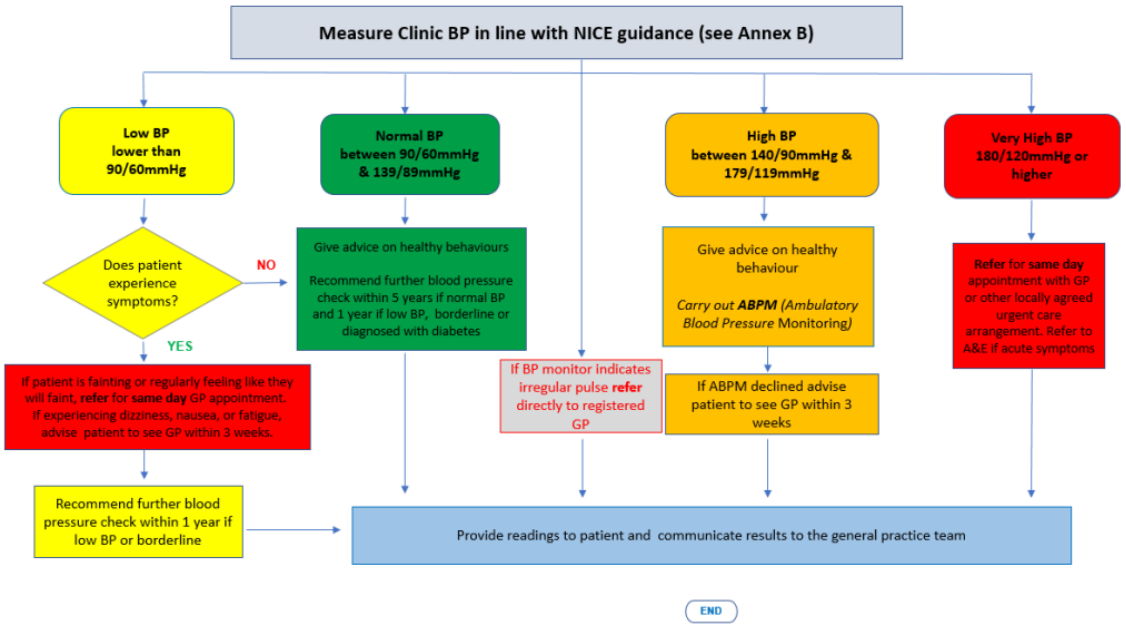
- The consultation is carried out in the pharmacy consultation room or another suitable private area.
- Measure the person's blood pressure.
- Record the systolic and diastolic readings.
- Provide healthy lifestyle advice and signposting.
- Explain the result clearly to the person.
- Invite them to have an ABPM if their BP indicated a need.

Annex B: Guidance on clinic blood pressure check



5. Act on the result- We must follow the service specification at all times

- **Normal blood pressure:** give healthy lifestyle advice and advise the person to have their blood pressure checked again in 5 years.
- **High blood pressure:** offer ambulatory blood pressure monitoring if the clinic reading is 140/90mmHg or above but below 180/120mmHg.
- **Very high blood pressure:** urgently refer the person and seek emergency help if they have acute symptoms such as chest pain, new confusion, signs of heart failure or severe headache.
- **Low blood pressure:** provide appropriate advice and refer to the GP practice if there are concerns.



6. Provide ambulatory blood pressure monitoring when needed

- Fit the ambulatory blood pressure monitor and explain how it works.
- Advise the person not to get the monitor wet and to avoid baths or showers during the monitoring period.
- Set the monitor to take two readings per hour during the person's usual waking hours.
- Use the average of at least 14 daytime readings to interpret the result.
- Download the information from the ABPM on to the computer and send the report to the general practice.

7. Review the ambulatory monitoring result

- **Average below 135/85mmHg and above 90/60mmHg:** reassure the person and give healthy lifestyle advice.
- **Average 135/85mmHg or above but below 150/95mmHg:** refer the person to their GP practice within three weeks.
- **Average 150/95mmHg or above but below 170/115mmHg:** refer the person to their GP practice within seven days, or sooner if they have symptoms.
- **Average 170/115mmHg or above:** arrange same-day referral to the GP practice, or urgent care if the GP practice cannot be contacted.

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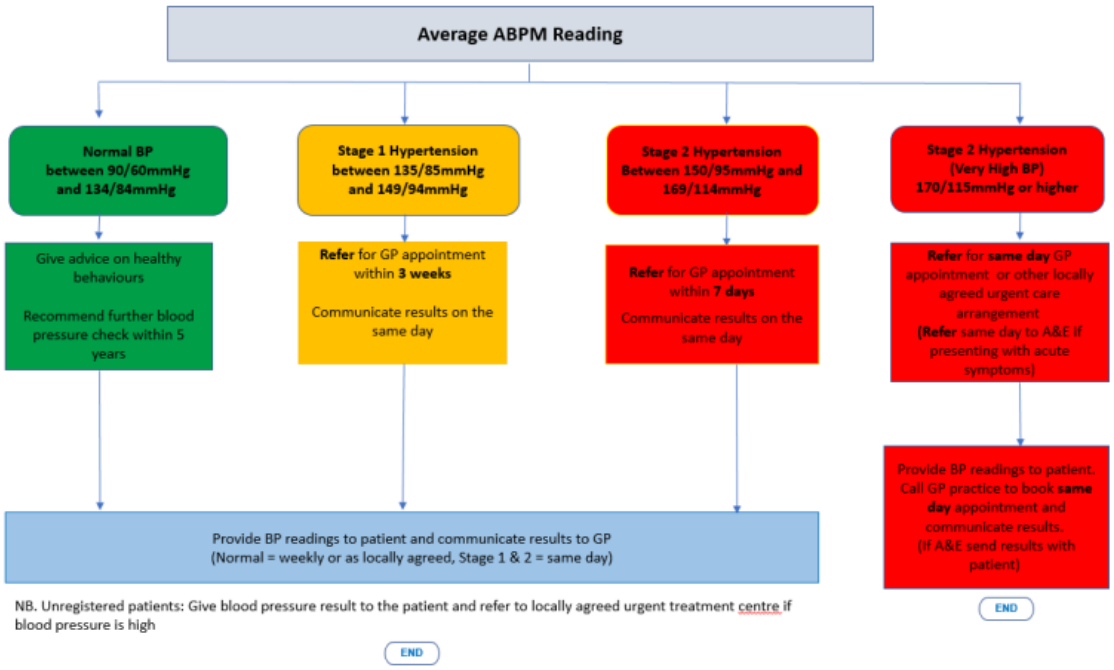
Annex D: ABPM flowchart



8. Share results with the GP practice

- All results are sent to the person's registered GP practice using GP Connect Update which is automatically assigned the correct coding information and general practice can add into patient records with one click. If this is not enabled at general practice the assured, IT system will default to send these results as NHSmail this information is then required to be manually added to patient records and coded accordingly.
- For urgent results, community pharmacies telephone the GP practice while the person is still in the pharmacy or signpost the patient to A&E depending on the result from the consultation.

Last reviewed: 16th July 2026
Next Review Date: April 2027