CLINICAL GUIDELINES ABBREVIATED

Clinical guidelines, such as the abbreviated versions shown here, can be helpful in caring for patients. However, fulfilling the guidelines does not necessarily equate with quality care. The patient's experience must also be considered.

HYPERTENSION

[Paraphrased from Chobanian AV, Bakris GL, Black HR, et al. Seventh report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure. Hypertension. *2003;42(6):1206-1252.]*

Educate patient regarding disease.
Rule out secondary hypertension (exam findings, EKG, blood and urine testing).
Provide patient with blood pressure values and goals.
Educate patient regarding lifestyle modification.
Schedule monthly follow-up until patient reaches goal.
Test serum potassium and creatinine 1-2 times per year.
Advise stable patient to follow up every 6-12 months.
Assess tobacco status and assist in cessation/abstinence.
Note many caveats based on presence/absence of co-morbid conditions.

CHOLESTEROL

[Paraphrased from Fletcher B, Berra K, Ades P, et al. Managing abnormal blood lipids: a collaborative approach. Circulation. *2005;112:3184-3209.]*

Educate patient regarding disease.
Educate patient regarding lifestyle modification.
Conduct lifestyle modification trial (6-12 months).
Assess liver transaminases 6-12 weeks after initiation of pharmaceutical intervention.
Assess smoking status and assist in cessation/abstinence.
Test fasting lipids twice per year in stable patients or quarterly in those not at goal.
Note many caveats based on presence/absence of co-morbid conditions.

DIABETES

[Paraphrased from American Diabetes Association. Standards of medical care in diabetes. Diabetes Care. *2007;30(suppl 1):S4-S41.]*

Educate patient regarding glucose testing.
Advise patient to test blood glucose regularly.
Conduct A1C testing at least twice per year for stable patients or quarterly for patients not at goal.
Establish A1C goal of less than 7 percent.
Arrange for patient to receive nutritional counseling.
Arrange for patient to receive education on self-management.
Advise patient to exercise moderately at least 150 minutes per week or vigorously at least 90 minutes per week.
Screen for depression.
Screen for hypoglycemic episodes at each visit.
Conduct annual microalbumin screen.
Perform monofilament exam of feet.
Conduct annual retinopathy screening.
Deliver annual influenza vaccine.
Deliver one-time pneumococcal vaccine for adults (booster if >64 years and first dose was given at <65 years of age).

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