Blood Pressure Data Collection Summary

Alaska Faith Community Nurse Resource Center

Faith Community: RN: Date:

Client	√ if first time BP screen at churc h	If this is first time screen at church, when was last time prior that BP was taken?	√ if this is follow up BP screen At church	HX of Diabetes or Pre- diabetic Yes No		√ Category				Education	New Med or Meds	Medication Education	Referral
Initials					N o r m a l	E l e v a t e d	H T N	H T N II	H y p e r t e n s i v e C r i s i s	A - BP info B - Diabetes C - Nutrition D - Exercise E - Stress Mgt. F - Smoking G - Weight H - Other	or Meds Changed? Yes No Use Blood Pressure Screening Individual Participant Record	Education A – Action B - Side effects C – Precautions D - Med card provided	A - To health care provider B- Assistance to find a provider C - Community resource / agency D- 911/ Urgent Care
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