 **MOP 38 – ABPM and HBPM Results Letter Templates**

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| **ABPM and HBPM threshold values for results reported as normal, abnormal, or alerts and interpretations included in the report to study participants/their provider of health care** |
| **Threshold values/ Trigger conditions** | **Reported to participant as:** | **Script for report** |
| Systolic BP <90 and Diastolic BP <80 |  | Abnormal\* |  |  Your reading was low. If you are being treated for hypertension, you should see your healthcare practitioner within two weeks, to determine whether treatment should be held or changed. If you are not being treated for hypertension, please discuss with your healthcare practitioner at your next routine visit. |
| Systolic BP 90 to <120 and Diastolic BP <80 | Normal |  |  | Your blood pressure was normal. Please recheck it in one year. If you are being treated for high blood pressure, your healthcare practitioner may have given you a schedule for your next check-up. Please follow that schedule. |
| Systolic BP 120 to <130 and Diastolic BP <80 |  | Elevated  |  | Your reading was somewhat elevated, according to recent guidelines. You should have your blood pressure checked within two months by a healthcare practitioner. If you are being treated for high blood pressure, your healthcare practitioner may have given you a schedule for your next check-up. Please follow that schedule. |
| (Systolic BP 130 to <135 and Diastolic BP <80) or (Systolic BP <130 and Diastolic BP 80 to <85) |  | Abnormal |  | Your reading was elevated. You should have your blood pressure checked within a month by a healthcare practitioner. If you are being treated for high blood pressure, please see your physician. |
| (Systolic BP 135 to <165 and Diastolic BP <85) or (Systolic BP <135 andDiastolic BP 85 to <100) |  | Abnormal |  | Your reading was elevated. You should have your blood pressure checked within a month by a healthcare practitioner. If you are being treated for high blood pressure, please see your physician. |
| (Systolic BP 165 to <185 and Diastolic BP <100) or (Systolic BP <165 and Diastolic BP 100 to <110) |  |  | Alert | Your reading was significantly elevated. You should see your healthcare practitioner within one week, to determine whether treatment should be started or changed. If you have not done so already, please see your healthcare practitioner soon. |
| Systolic BP ≥185 or Diastolic BP ≥110 |  |  | Alert | Your blood pressure reading was very high. You must see your healthcare practitioner at the earliest opportunity to confirm this finding. If you have not done so already, please see your healthcare practitioner soon. |

**Summary of Ambulatory Blood Pressure Monitoring Results for ARIC Participants and their Physicians (to accompany graphs)**

**Participant’s name:** First Last **Birth Date:** MM/DD/YYYY

**Date of visit to the ARIC field center:** MM/DD/YYYY **ID:** XXXXXXX

Thank you for participating in the ambulatory blood pressure monitoring measurements. For this measurement, you wore a blood pressure cuff for 26 hours. Blood pressure fluctuates throughout the day and often it can be different in clinic compared to when you are at home living your normal routine. The average of ambulatory blood pressure has been shown to be more predictive of cardiovascular disease than clinic blood pressure. Here is the average of your blood pressure categorized into wake time blood pressure, sleep time blood pressure and overall blood pressure within the 26 hours.

|  |  |
| --- | --- |
| **Your ARIC Results** |  |
| Date | mm/dd/yyyy |
| Average **wake time** blood pressure (systolic/diastolic)   | SBP/DBP mmHg  |
| Average **sleep time** blood pressure (systolic/diastolic)  | SBP/DBP mm Hg  |
| Average **overall** blood pressure (systolic/diastolic)  | SBP/DBP mm Hg  |
| Percentage of successful measurements | ##% |
| Interpretation (*see Table 1*) |  |

An ABPM study is considered complete if it has at least 70% successful measurements.

**Graph Interpretation**

On the next page are three graphs showing your results during the study period.

The **first** graph includes systolic blood pressure (red line), diastolic blood pressure (blue line), heart rate (green line), and the MAP or mean arterial pressure (purple line). MAP is a weighted average of systolic and diastolic blood pressure.

The **second** graph shows your pulse pressure (the difference between systolic and diastolic blood pressure).

The **third** graph shows your activity levels.

Note the daytime average may differ from when you actually slept. This should be considered when interpreting the daytime average. It is normal and healthy for blood pressure to go down at night, which may or may not be the case on your graph.

**Summary of Home Blood Pressure Monitoring Results for ARIC Participants and their Physicians**

**Participant’s name:** First Last **Birth Date:** MM/DD/YYYY

**Date of visit to the ARIC field center:** MM/DD/YYYY **ID:** XXXXXXX

Thank you for participating in the home blood pressure monitoring measurements. For this measurement, you checked your blood pressure at home in the morning and evening over an 8-day period. The average of all these blood pressure measurements has been shown to predict cardiovascular disease. This can also help inform more personalized blood pressure treatment. Below is the average of your home blood pressure monitoring.

|  |  |
| --- | --- |
| **Your ARIC Results** |  |
| Date | mm/dd/yyyy |
| Average **home** blood pressure (systolic/diastolic) | SBP/DBP mmHg |
| Average **home** pulse or heart rate | HR beats per min |
| Number of successful measurements | ## |
| Interpretation (see *Table 1*) |  |

**THANK YOU FOR YOUR PARTICIPATION IN ARIC.**