

Facility:

Effective date:

Date of last review (if applicable):

Scheduled date of next review:

Reference to a protocol (if applicable):

CLINICAL SITUATION OR TARGET POPULATION

- ▶ Adult with primary hypertension requiring antihypertensive pharmacological therapy.

INDICATIONS

- ▶ People aged 18 years or older currently receiving antihypertensive medication for the management of hypertension

AND

- ▶ Whose individual prescription for their antihypertensive medication:
 - does not include the medication adjustment
- OR
- expired within the past 6 months.

POINT OF SERVICE

Indicate the **sector(s)** (e.g., obstetrics or home care) or the **setting(s) affiliated with an institution** (e.g., CLSC, CHSLD or hospital) or the **non-institutional setting(s)** (FMG, private clinic or community pharmacy).

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AUTHORIZED HEALTH PROFESSIONAL(S) OR OTHER AUTHORIZED PERSON(S)

Enter the name of the authorized professional or other person authorized to use the collective prescription for the performance of a professional activity. Certain qualifications or training may be required.

Example: Nurse clinicians who have had the “x” training available on the digital learning environment (DLE) website.

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PROFESSIONAL ACTIVITY OR ACTIVITIES CONCERNED

The collective prescription must stipulate the activity or activities reserved for the authorized persons concerned by the prescription. A list of the activities that can be performed under a collective prescription is available on the Collège des médecins du Québec's website ([Tableau des professionnels et intervenants pouvant répondre à une OC](#)).

Example: Initiating diagnostic and therapeutic measures in accordance with a prescription.

- ▶ Initiating diagnostic measures in accordance with Quebec's National Medical Protocol [No.628002](#)

CONTRAINDICATIONS

- ▶ Same contraindications as those specified for the application of Québec's National Medical Protocol [No. 628002](#), namely:

- Pregnancy or breastfeeding
- Hypertensive emergency:
 - severe hypertension (generally greater than 180/110 mm Hg)

AND

- target-organ damage that is life-threatening (e.g., focal neurological symptoms, sudden confusion, retrosternal pain, sudden-onset dyspnea)
- Chronic kidney disease with estimated glomerular filtration rate (eGFR) less than 30 ml/min/1.73 m²

MEDICAL PROTOCOL

Refer to the Institut national d'excellence en santé et en services sociaux National Medical Protocol [No. 628002](#) published on its website at the time of application of this prescription.

LIMITS OR SITUATIONS WHERE A CONSULTATION IS MANDATORY

- ▶ Intolerance to the medication.
- ▶ Development of a contraindication to the application of the Québec's National Medical Protocol or to the antihypertensive medication during treatment;
 - If a hypertensive emergency occurs, refer the individual to emergency services for immediate management.
- ▶ Blood pressure targets not achieved after six months of treatment adjustment.
- ▶ Blood pressure targets not achieved despite reaching the maximum dose that was prescribed, specified in the Québec's National Medical Protocol, or tolerated.
- ▶ Increase in serum creatinine of more than 30% following the initiation or adjustment of an antihypertensive medication.
- ▶ Laboratory test result outside the normal reference range.
- ▶ Symptomatic orthostatic hypotension that prevents further adjustment of antihypertensive medication to achieve the target blood pressure.
- ▶ Repeatedly observed nonadherence to medication.

MODE OF COMMUNICATION

If applicable, plan the preferred mode of communication between the health professional (physician or SNP) and the authorized professional or the authorized person referred to in the CP for information considered essential.

REFERENCE TOOLS AND SOURCES

The main reference items used, namely, protocols, guidelines and reference documents that were used to develop this collective prescription, are to be mentioned in this section.

IDENTIFICATION OF PRESCRIBING PROFESSIONAL

The collective prescription must specify the names of all the prescribing professionals, that is, those who participate in the collective prescription, their telephone numbers and their license numbers.



IDENTIFICATION OF RESPONDING PROFESSIONAL

This section should help the authorized professional or the other authorized person who uses the collective prescription to identify the responding professional(s) or to provide a mechanism of identifying them.

Example: The on-duty physician or SNP at the FMG's walk-in clinic.



IMPLEMENTATION PROCESS

1. DEVELOPMENT OF CURRENT VERSION

Identification of the physician(s), the SNP and the collaborators involved. It is important to identify, when first starting to develop the CP, all the professionals who will participate in it.

2. VALIDATION OF CURRENT VERSION

Identification of those responsible with regard to their reserved professional activities.

3. APPROVAL OF CURRENT VERSION WITHIN THE INSTITUTION

Via the signature of the representative of the Council of Physicians, Dentists and Pharmacists (CPDP) when a physician acts as the prescriber and responding professional.

Via the signature of the Director of Nursing (DN), if the SNP is the prescriber and responding professional.

! *The CP must be signed by the CPDP representative and the DN when it involves both parties.*

Representative of the Council of Physicians, Dentists and Pharmacists (CPDP)

Last name:

First name:

Signature:

Date:

Director of Nursing (DN)

Last name:

First name:

Signature:

Date:

4. APPROVAL OF CURRENT VERSION OUTSIDE THE INSTITUTION

Via the signature of each of the prescribing professionals for whose patients the collective prescription can be initiated.

Last name and first name	License No.	Signature	Telephone