

# Hypertension: confirming diagnosis with HBPM or ABPM

NICE indicator

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[www.nice.org.uk/indicators/ind115](https://www.nice.org.uk/indicators/ind115)

## Indicator

The percentage of people with a new diagnosis of hypertension (diagnosed on or after 1 April 2014) that has been confirmed by ambulatory blood pressure monitoring (ABPM) or home blood pressure monitoring (HBPM) in the 3 months before being entered on the register.

## Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

## Rationale

This indicator is intended to measure the number of people whose hypertension is confirmed using ABPM or HBPM.

[NICE's guideline on hypertension](#) recommends that if a person has a clinic blood pressure between 140/90 mmHg and 180/120 mmHg, they should be offered ABPM to confirm the diagnosis of hypertension. If a person is unable to tolerate ABPM, HBPM is a suitable alternative to confirm the diagnosis of hypertension. Using these diagnostic techniques are recommended as being more accurate than clinic blood pressure monitoring and therefore reduce the risk of over-diagnosis.

## Source guidance

[Hypertension in adults: diagnosis and management. NICE guideline NG136](#) (2019, updated 2023), recommendations 1.2.3, 1.2.4, 1.2.6 and 1.2.7

## Specification

**Numerator:** The number of patients in the denominator whose diagnosis has been confirmed by ambulatory blood pressure monitoring (ABPM) or home blood pressure monitoring (HBPM) in the three months before entering on to the register.

**Denominator:** The number of patients with a new diagnosis of hypertension (diagnosed on or after 1 April 2014).

**Calculation:** Numerator divided by the denominator, multiplied by 100.

**Exclusions:** None.

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

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