

April 29, 2022

Micky Tripathi, PhD, MPP  
National Coordinator for Health Information Technology  
Office of the National Coordinator (ONC)  
U.S. Department of Health and Human Services  
330 C St. SW., Mary Switzer Building, Office 7009A  
Washington, DC 20201

**RE: Comments on the Draft US Core Data for Interoperability (USCDI) V3**

Dear Dr. Tripathi,

The Public Health Informatics Institute (PHII) is a program of The Task Force for Global Health, a 501(c)(3) nonprofit organization. Our vision is that every country has the capacity to access, use and share timely information to protect and improve the health of its people. PHII has served as a resource to domestic public health agencies since 1992, advancing solutions to public health informatics challenges by acting as a conduit that connects partners to reach common goals.

PHII collaborated with the Centers for Disease Control and Prevention's (CDC) Division for Heart Disease and Stroke Prevention (DHDSP) to complete a [national health information technology landscape analysis](#). We provided recommendations to increase widespread implementation of self-measured blood pressure monitoring (SMBP); a promoted strategy within the [US Surgeon General's Call to Action to Control Hypertension](#) report. The landscape analysis provided strategies related to policy, interoperability standards and specifications, and SMBP in practice that could be leveraged or improved to increase SMBP adoption.

PHII agrees with its partners—CDC, the American Medical Association (AMA) and the National Association of Community Health Centers (NACHC)—that average blood pressure should be moved from a level 2 data element to full inclusion within USCDI version 3. Average blood pressure is included as part of the *HL7 FHIR® Implementation Guide: Vital Signs, Release 1- US Realm (1st Standard for Trial Use)*.

The [2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASP/NMA/PCNA Guideline](#) for the Prevention, Detection, Evaluation and Management of High Blood Pressure in Adults and the [AHA 2019 Scientific Statement on the Measurement of Blood Pressure in Humans](#) provide

guidance on obtaining an individual's blood pressure. According to both of these recommendations, to properly estimate a person's blood pressure:

- Office-obtained measurement should include the average of two or more blood pressures obtained on two or more occasions.
- SMBP should include the average of all blood pressure measurements obtained over seven or more days.

Including average blood pressure in the USCDI would make it easier for physicians and other healthcare providers to diagnose high blood pressure and assess blood pressure control more accurately. Physicians need health information technology systems that can store and exchange average blood pressure, distinct and apart from individual systolic and diastolic blood pressure readings. This can help with documentation and enable physicians to use this specific information in their clinical decision making.

We appreciate the opportunity to provide these comments.

Sincerely,



Vivian Singletary, MBA, JM  
Director  
Public Health Informatics Institute