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REQUIREMENTS FOR OBTAINING AN ACCURATE BLOOD PRESSURE READING

GOOD PRACTICE

INITIAL VISIT

Readings should be taken in each arm and the higher arm should be used for subsequent measurements.

FOLLOW UP VISITS

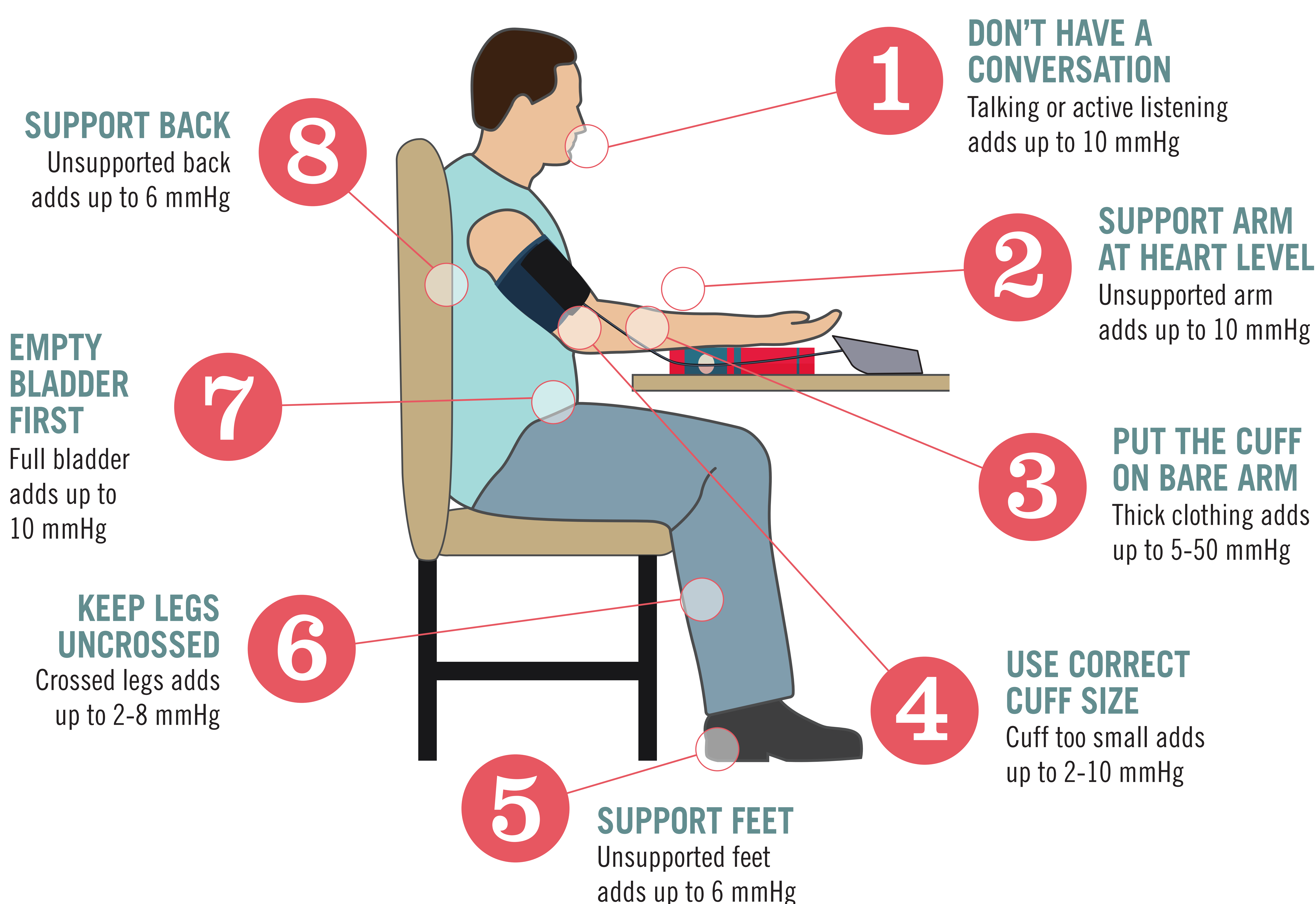
Two or more readings should be taken at each visit and the mean calculated.

PREPARATION OF THE PATIENT BEFORE TAKING THE BLOOD PRESSURE

- ★ Rest comfortably in a quiet environment for 5 minutes in a chair.
- ★ Have an empty bladder.
- ★ Not have eaten, ingested caffeine, smoked, or engaged in physical activity at least 30 minutes prior to the measurement.

✓ *Measure the blood pressure in a quiet, private environment with adequate ambient temperature.*

IDEALLY, USE UPPER ARM VALIDATED ELECTRONIC DEVICES



AUSCULTATION. If only this method is available, the preparations described in the above quadrants should apply.

♥ Inflatable bladder width should be about 40% of arm circumference and bladder length should be about 80-100% of the individual's arm circumference.

♥ For auscultation, the lower edge of the cuff should be 2-3 cm above the elbow crease and the tubing or

marking to denote the artery should be centered over the brachial artery.

♥ For auscultatory measurements, the cuff should be at heart level.

♥ Increase the pressure rapidly to 30 mmHg above the level at which the brachial or radial pulse is extinguished, place the stethoscope head over the

center of the brachial artery, deflate the cuff by approximately 2 mmHg per heartbeat, and determine systolic (appearance of Korotkoff sounds) and diastolic (disappearance of Korotkoff sounds).

♥ Avoid terminal digit preference (rounding up or down to a zero for the last digit).

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