



# SITTING BLOOD PRESSURE FORM

OMB#: 0925-0281  
Exp. 3/31/2014

ID NUMBER:

FORM CODE:

DATE: 06/01/2011  
Version 1.0

## ADMINISTRATIVE INFORMATION

0a. Completion Date: / /   
Month Day Year

0b. Staff ID:

### A. Arm measurements

1. Arm used for sitting blood pressure measurement (choose one):

Right (preferred) .....A

Left .....B

2. Arm circumference (cm): .

3. Cuff size (arm circumference in brackets):

Small {17.0-21.9 cm, CS19} ..... A

Adult {22.0-32.5 cm, CR19} ..... B

Large {32.6-42.5 cm, CL19} ..... C

X Large {42.6-50.0+ cm, CX19} ..... D

4. Time of measurement

a. Time of day: :   
H H M M

b. AM  or PM

### B. First blood pressure / pulse rate

5. Systolic .....  mmHg

6. Diastolic .....  mmHg

7. Pulse.....  bpm

**C. Second blood pressure / pulse rate**

8. Systolic .....    mmHg

9. Diastolic .....    mmHg

10. Pulse.....    bpm

**D. Third blood pressure / pulse rate**

11. Systolic .....    mmHg

12. Diastolic .....    mmHg

13. Pulse.....    bpm

**E. Average blood pressure / pulse rate**

14. Systolic .....    mmHg

15. Diastolic .....    mmHg

16. Pulse.....    bpm



# INSTRUCTIONS FOR THE SITTING BLOOD PRESSURE (SBP) FORM

## I. General Instructions

The Sitting Blood Pressure Form is completed during the participant's clinic visit. The technician must be certified in measurement of blood pressure. There should be no exertion, eating, smoking or exposure to cold for half an hour before recording blood pressure. It is also important that the subject have no change of posture for five minutes before recording blood pressure.

## II. Detailed Instructions for each Item

- 0a. Enter the date on which the participant was seen in the clinic.
- 0b. Enter the staff ID for the person who completed this form.
- 1. Explain to the participant that you will be measuring their upper arm circumference to determine the appropriate cuff size for the later blood pressure measurements. Ask him/her if there is any medical reason that he/she cannot have a blood pressure measurement taken on the right arm. At the same time, examine the arm for open lesions, rashes, etc. Based on the participant's response and your observation check the appropriate response. and then proceed with measurement of the appropriate arm. The right arm is preferred, if possible.
- 2. Arm circumference is measured at the midpoint between the tip of the elbow and the posterior tip of the shoulder as indicated in the Blood Pressure section, Manual 2. Arm circumference is measured to the centimeter, rounding down.
- 3. Cuff size is determined by the arm circumference measurement in item 2. The appropriate size for a given arm circumference is given below, and also appears on the form itself.

<u>Arm Circumference</u>	<u>Cuff Size</u>
17.0-21.9 cm	CS19
22.0-32.5 cm	CR19
32.6-42.5 cm	CL19
42.6-50.0+ cm	CX19

- 4. Instruct the participant to sit quietly, without changing his/her posture, while keeping both feet flat on the floor, for five minutes, while you step out of the room. Start a timer, and return promptly after 5 minutes have elapsed. After the participant has sat quietly for five minutes, enter the time. A five minute wait with no change of posture must precede the first blood pressure measurement.

## B.-D. First, second, third blood pressure / pulse rate

Measure and record systolic and diastolic blood pressures as described in the Manual of Procedures. Right justify, using leading zeroes if necessary.

## E. Average blood pressure / pulse rate

These items are calculated automatically by the OMRON system.