

# Measure accurately

## Pre-assessment

Instructions: Check all the boxes that apply to your practice.

### 1. What blood pressure (BP) measurement devices are used?



Manual (portable aneroid)



Manual (mounted aneroid)



Semi-automated



Automated

- Manual devices (portable aneroid)
  - Calibrated\* at least every six months
- Manual devices (mounted aneroid)
  - Calibrated\* every six months
- Semi-automated devices (automated device that takes only one reading and requires the observer\*\* to be in the room with patient during measurement)
  - Device validated for clinical accuracy
  - Calibrated\* annually
- Automated office BP (AOBP) devices: Automated device that can be programmed to take multiple measurements without the observer\*\* in the room
  - Device validated for clinical accuracy
  - Calibrated\* annually
- Multiple adult cuff sizes (small, regular, large, extra large) are available for each device

### 2. If multiple devices are used, what device is used for the initial BP measurement?

- Manual (portable aneroid or mounted aneroid)
- Semi-automated
- AOBP

**3. How would you describe the environment where BP is measured?**

- Quiet
- Chairs with back support are available
- Hard surface at heart level to rest BP arm is available
- Stool or foot support is available to ensure feet are supported on a flat surface
- If manual BP device is used, gauge or dial at eye level of the observer\*\*

**4. What is the process before BP measurements are taken?**

- Advise patients not to exercise, use tobacco or consume caffeine within 30 minutes of appointment
- Check BP in both arms at first visit, and use arm with higher BP for subsequent measurements
- Ensure the patient has an empty bladder
- Seat the patient in a chair with back supported and feet supported flat on a surface
- Ensure legs are uncrossed
- Place the cuff on a bare upper arm
- Ensure appropriate cuff size is used
- Support the arm with middle of cuff at heart level
- Rest the patient for five minutes if the observer\*\* will be in the room during measurement

**5. What is the technique used when performing manual BP measurements (if applicable)?**

- Palpate the radial pulse then inflate cuff until radial pulse is obliterated
- Inflate cuff an additional 20–30 mm Hg above this level
- Deflate cuff at a rate of 2 mm Hg per second

**6. If initial BP is high, is a repeat or “confirmatory” measurement performed?**

- Yes
- No

**7. If a confirmatory measurement is performed, what device is used to recheck BP?**

- Manual (portable aneroid or mounted aneroid)
- Semi-automated
- AOBP

**8. What is the process when performing confirmatory measurements (if applicable)?**

- Perform one additional reading
- Perform two or more additional readings
- Wait one to two minutes between each measurement
- Leave the patient alone in the room during the measurements if using an AOBP device
- Average the readings

**9. Who performs the confirmatory measurements (if applicable)?**

- Provider
- Nurse or medical assistant

**10. What is the process after BP measurements are taken?**

- Document average BP readings in the electronic health record
- Notify provider of out-of-range readings
- Recommend out-of-office BP measurements to confirm diagnosis of sustained hypertension, make the diagnosis of white-coat or masked hypertension, or to assess for BP control in those already diagnosed and treated

\*Calibrated is when the BP device is tested for accuracy.

\*\*Observer is the individual measuring BP.