

BLOOD PRESSURE MEASUREMENT

USING MANUAL BLOOD PRESSURE MONITORS

- The patient should be seated in a chair with a back rest and feet on the floor for at least 5 minutes, relaxed and not speaking
- The arm should be supported at the level of the heart, resting on a cushion, pillow or arm rest. Ensure no tight clothing constricts the arm
- Place the cuff on neatly 2cm above the brachial artery and aligning the 'artery mark'. The bladder should encircle at least 80% of the arm but not more than 100%
- Use the cuff size recommended by the manufacturer of the monitor
- Estimate the systolic beforehand:
 - *Palpate the brachial artery*
 - *Inflate cuff until pulsation disappears*
 - *Deflate cuff*
 - *Estimate systolic pressure*
- Then inflate to 30mmHg above the estimated systolic level to occlude the pulse
- Place the stethoscope diaphragm over the brachial artery and deflate at a rate of 2-3mm/sec until you hear regular tapping sounds
- Measure systolic (first sound) and diastolic (disappearance) to nearest 2mmHg

Points to note:

- The date of next servicing should be clearly marked on the sphygmomanometer (annually).
- All maintenance necessitating handling of mercury should be conducted by the manufacturer or specialised service units.
- Before measuring blood pressure in pregnancy or other special circumstance, ensure that the device used is clinically validated for that setting (<http://bihs.org.uk/>)

