



BLOOD PRESSURE GOALS AND MEASUREMENT

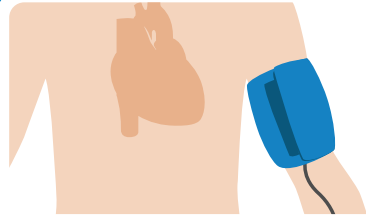
Improving blood pressure measurements¹



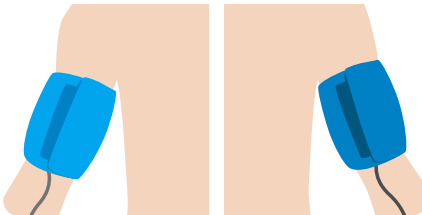
Seat patient quietly for several minutes




Measure arm circumference



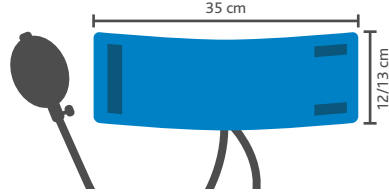
Locate the cuff at the level of the heart whatever the position of the patient



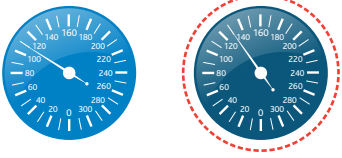
Measure blood pressure in both arms at first visit, look out for differences due to peripheral vascular disease




Use Phase I and V (disappearance) Korotkoff sounds to identify systolic and diastolic blood pressure respectively



Standard bladders should be adequate to provide reliable measurements



If arm pressure in both arms differ, take the higher value as the reference point, when the auscultatory method is used



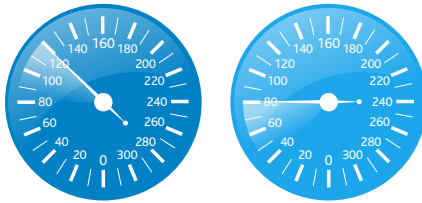
Measure heart rate by pulse palpation (30s) after the second measurement in the sitting position

Take at least two separate measurements, 1–2 minutes apart

Take further readings if significantly different

Normal & hypertensive blood pressure levels²

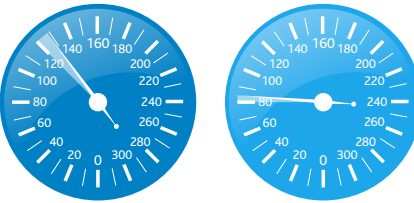
OPTIMAL BLOOD PRESSURE



SBP < 120 mmHg

DBP < 80 mmHg

NORMAL RANGE



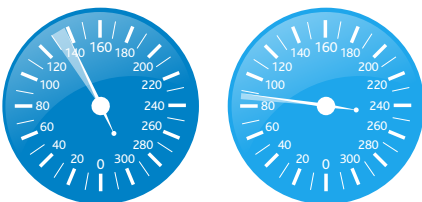
SBP 120–129 mmHg

DBP 80–84 mmHg

Systolic blood pressure

The highest arterial blood pressure of a cardiac cycle occurring immediately after systole of the left ventricle of the heart

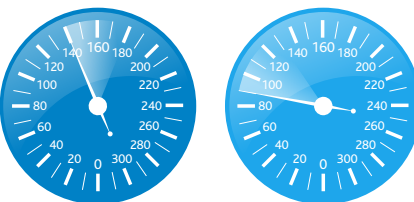
HIGH-NORMAL



SBP 130–139 mmHg

DBP 85–89 mmHg

HYPERTENSION



SBP ≥ 140 mmHg

DBP ≥ 90 mmHg

Diastolic blood pressure

The lowest arterial blood pressure of a cardiac cycle occurring during diastole of the heart

References:

1. Mancia G, De Backer G, Dominiczak A, et al. *J Hypertens* 2007; 25: 1105–1187. 2. Mancia G, Laurent S, Agabiti-Rosei E, et al. *J Hypertens*. 2009; 27: 2121–58.