**Blood pressure**

The first procedure to be undertaken is blood pressure. Blood pressure readings are taken using a calibrated blood pressure sphygmomanometer. Blood pressure is the force pushing blood through the blood vessels.

It is recorded as the **systolic blood pressure**, the pressure when the heart is contracting, and **diastolic pressure**, the pressure when the heart is relaxed.

- **High blood pressure** (hypertension) is defined as **systolic blood pressure greater than or equal to 140mmHg and/or diastolic blood pressure greater than or equal to 90 mmHg**.

- Two blood pressure measurements are taken five to ten minutes apart while the participant is relaxed and seated. During this time, the staff member has the opportunity to talk with the client about relevant aspects of care or patient concerns.

- It will be necessary to record two of these three readings to obtain a mean blood pressure reading.

- It is necessary to measure the upper arm circumference to determine the appropriate cuff size.

Before the participant is seated in the clinic, the staff member will need to determine whether an outer garment may need to be removed and assess whether the sleeve is able to be rolled up to facilitate the use of the cuff. In some cases, where a sleeve is tight, it may be necessary to slip the arm out of the garment. Staff members should always use discretion in this case.

**Height measurements**

Participants will have their standing height recorded using a wall mounted stadiometer. The procedure is as follows:

1. Participants will remove their shoes, sunglasses and any hair accessories. Staff members should ask the participant to stand in an upright position, with their head facing forward with a level gaze and heels back against the base.

2. The top plate of the height measure is brought down to rest on the head (not just sitting on top of the hair). Where there is a curvature of the spine and resulting stooped posture, the position is as described but an extension to the top plate outwards to allow for the non contact of the plate with the head.

3. Height is a single measure recorded in metres (m) to the nearest 0.5 centimetre.
**Weight measurement**

Body weight will be recorded on calibrated scales. The procedure is as follows:

1. Check that the scales are reset to zero before use.
2. Participants will remove shoes and any heavy garments (e.g. keys) before stepping onto the scales.
3. Body weight will be measured and recorded by a single reading in kilograms (kg) to the nearest 0.1 kilogram.
4. If the participant is very obese, the scales within the AMMHD have a 200kg limit. If the consumer is heavier than 200kg alternative scales will need to be sourced.

**Body Mass Index (BMI)**

Body mass index (BMI) is calculated from your weight and height using the formula: weight (kg) divided by height² (m²). The criteria for classifying BMI are as follows:

- 18.5 - 25 = healthy weight range
- 25 - 30 = overweight
- 30 - 35 = obese stage 1
- 35 - 39.9 = obesity stage 2
- 40+ = obesity stage 3 (morbid obesity)

**Waist measurements**

Three measurements of the waist are taken and recorded in centimetres (cm) using an inelastic tape, maintained in a horizontal plane, to the nearest 0.1 centimetre. There is an indication of android obesity, if the waist measurement is greater than:

- 94cm for males and 80cm for females of Caucasian races
- ≥ 90cm for males and ≥ 80cm for females of South Asian and South-East Asian origin

An android or centralised pattern of fat distribution, where excess body fat is distributed in the abdominal region rather than on the hips and thighs, plays and important role in determining risk of cardiovascular disease and diabetes, particularly in men.

Staff members should ensure that the measuring tape is even and clothing is not interfering with the measurement. In some cases, it may be necessary to ask the participant to hold up their shirt or pullover.

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