### BLOOD PRESSURE

BP is recorded with a sphygmomanometer as systolic blood pressure over the diastolic pressure (e.g., 133/87).

**Systolic pressure:**
measures the pressure when the heart is contracting, and **diastolic pressure:**
measures the pressure when the heart is relaxed between each beat.

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

BP is a measure of health status and risk of cardiovascular complications.

BP measures determine medication treatment regimes that aim to keep resting BP below 140/90mmHg.

**Protocol and Procedure:**
Before the consumer is seated for monitoring, determine whether sleeve is able to be rolled up or an outer garment may need to be taken off to facilitate the use of the cuff.

Measure to upper arm circumference to determine appropriate cuff size.

Ensure the arm is supported on a desk or on a pillow on the consumer’s lap. Wrap the cuff firmly with the cuff so that the hose connected to the sphygmo and cuff is in the centre, inside of the arm.

2 blood pressure measurements are taken 5-10 minutes apart while the consumer is relaxed and seated.

It will be necessary to record the 2 readings in order to obtain a mean blood pressure reading.

**Rationale:**
Tight outer garments under a BP cuff can artificially raise the BP reading.

Consumer actions of getting up and down from the chair and taking off the outer garment can artificially briefly raise BP.

Incorrect size cuff can artificially raise the BP reading by as much as 15mmHg.

Muscle contraction in the unsupported arm can raise BP artificially.

To be accurate, blood pressure measures need be taken twice (5-10 minutes apart), and when the consumer is at rest.

During this time, the staff member has opportunity to talk with the consumer about relevant aspects of care or any consumer concerns.
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<th>MEASURE</th>
<th>TARGET RANGE</th>
<th>PROTOCOL AND PROCEDURE</th>
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<tr>
<td><strong>HEIGHT</strong>&lt;br&gt;Clients will have their standing height recorded for BMI using a wall mounted stadiometer or hard tape measure</td>
<td>Height is a single measure recorded in metres (m) to the nearest 0.5 centimetre.</td>
<td>Clients remove their shoes (if possible), sunglasses and any hair accessories. The client stands in an upright position, with their head facing forward with a level gaze and heels back against the base. 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.</td>
<td>For the purpose of calculating BMI, adult height measure is usually necessary only once and then recorded. If the client refuses to remove shoes then measure the shoe heel and subtract the difference.</td>
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<td>WEIGHT</td>
<td>Body weight will be recorded on calibrated scales</td>
<td>Body weight will be measured and recorded by a single reading in kilograms (kg) to the nearest 0.1 kilogram.</td>
<td>Check that the scales are reset to zero before consumer steps onto them. Consumers will remove shoes and any heavy garments (eg belt/buckle, money in change, keys) before stepping onto the scales.</td>
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| BMI     | <18.50 = Underweight  
18.5 - 25 = healthy weight range  
25 - 30 = overweight  
30 - 35 = obese stage 1  
35 - 39.9 = obese stage 2  
40+ = obese stage 3 (morbid obesity) | Body mass index (BMI) is calculated by weight (kg) divided by height² (m²). | |
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| WAIST   | There is an indication of android obesity, if the waist measurement is greater than:  
  Europid (Caucasian)  
  >94cm male  
  >80cm female  
  South Asian and South-East Asian  
  ≥ 90cm male  
  ≥ 80cm female |

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| 3 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.  

**Waist circumference**  
Have the consumer place their hands on top of their hip bones - this allows better definition of the waist |

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| 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 an important role in determining risk of cardiovascular disease and diabetes, particularly in men.  
Ensure that the measuring tape is even, firm but never tight and that clothing is not interfering with the measurement. In some cases, it may be necessary for the consumer to hold up their shirt or pullover. If trousers have a “baggy” appearance, have the consumer pull them up, to better define an outline |

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1 Adapted from the North West Adelaide Health Study Clinic Manual Protocol

Department of Health, Statewide Service Strategy Division: South Australian Strategic Plan - Target T2.7 Strategy 5