

PROCEDURE

TITLE: ORTHOSTATIC BLOOD PRESSURE MEASUREMENT PROCEDURE

PURPOSE: To outline nursing methodology in obtaining orthostatic blood pressure readings.

EQUIPMENT LIST:

1. Stethoscope
2. Sphygmomanometer
3. Alcohol Swab
4. Blood Pressure Cuff, appropriate size for patient

CONTENT: PROCEDURE STEPS:

KEY POINTS:

A. ORTHOSTATIC BLOOD PRESSURE

****Orthostatic blood pressure readings may only be performed by a RN.****

1. Explain procedure to patient.

Orthostatic blood pressures are ordered for conditions such as hemorrhagic shock, dehydration, or drug therapy with antihypertensive agents, history of fainting, postural dizziness. Blood pressure may take longer than normal to stabilize when patient is changing from a lying position to a sitting or standing position.

Follow standards steps for blood pressure measurement

Procedure in Perry and Potter

2. Have patient in flat position in bed for 5 minutes before taking blood pressure and apical pulse.

Patient's condition or order of physician will determine whether or not bed may be flat.

3. Have patient sit up at 90 degree angle, (dangle legs over side of bed) and take blood pressure and apical pulse immediately. Question patient concerning change in equilibrium.

Patient may feel dizzy. Stop procedure and evaluate patient. Call for assistance if needed. Orthostatic hypotension can be asymptomatic, symptomatic (dizziness, faintness), acute, reversible, chronic or irreversible (endocrine and neurogenic)

4. Have patient stand at bedside. Take blood pressure and apical pulse immediately. Question patient concerning change in equilibrium.

Standing pressure may be omitted, depending on patient's condition and/or physician's order.

5. Chart blood pressures and pulses, designate which readings were taken lying, sitting, and standing.

6. Report to physician any systolic change greater than 10 mm Hg or any diastolic change greater than 20 mm Hg in lying/sitting or lying/standing positions. Report any apical pulse change greater than 20 beats per minute in a lying/sitting or lying/standing position.

Orthostatic hypotension is defined as a decline of >20mmHg in systolic blood pressure or a decline of >10mmHg in Diastolic blood pressure occurring when there is movement from supine to sitting or standing positions. The change is noted within 3 minutes after position change.

DOCUMENTATION:

1. Document all blood pressure measurements in the Electronic Medical Record where electronic nurses' notes are utilized or unit specific flowsheets.

REFERENCES:

1. Bickley, L. Bates' Guide to Physical Examination and History Taking 10th edition. Lippincott Williams and Wilkins (2008)
2. Scalter, A and Alagiakrishnan K. "Orthostatic hypotension A primary care primer for assessment and treatment", Geriatrics, August 2004 Volume 59, Number 8

3. Lynn, P. Taylor's Clinical Nursing Skills, A nursing process approach. Lippincott Williams & Wilkins. (2007)
4. Perry, A. and Potter, P. Clinical Nursing Skills and Techniques 6th edition. Elsevier Mosby (2006)