## **Blood Pressure**



#### NURSE DELEGATION: INSTRUCTIONS FOR GENERAL NURSING TASK

General delegated tasks are those tasks that the Nurse identifies as general in nature and once learned can be performed for all residents. The Caregiver to whom the task is delegated must demonstrate ability to perform the task as instructed by the Nurse. By signing this delegation form, the Caregiver being delegated agrees to perform the task as taught. The nurse will review Caregiver performance annually or as needed to assure continued competency in performance of the task.

### General Task: MEASURING BLOOD PRESSURE

#### Supplies Needed

- 1. Digital Electronic Blood Pressure Meter with cuff, if used
- 2. Sphygmomanometer with cuff, if used, and a Stethoscope
- 3. Antiseptic or alcohol swabs
- 4. Hand Sanitizer Solution; use if no body fluid present

#### Procedures/Steps to Follow to Perform the Task

- 1. Explain the procedure to the resident.
- 2. Assemble the equipment at a convenient work area.
- 3. Expose the resident's arm above the elbow. Instruct the resident to relax his/her arm. Support the resident's forearm at his or her side during the procedure.
- 4. If using Digital Electronic Blood Pressure Meter, do the following:
  - Slip the cuff over the arm and up above the elbow.
  - Tighten the cuff, using the Velcro fastener, until it is snug.
  - Turn on the meter, and it will pump the cuff automatically to the highest level to which it has been set.
  - Read the blood pressure and record on MAR or Vital Sign Flow Sheet.
  - Allow the meter to automatically turn itself off and deflate the cuff, then remove the cuff.
  - Remove disposable gloves and dispose of in impermeable plastic trash bag.
  - Wash hands with hand-washing solution.
  - Return equipment to the medication room.
- 5. If using a Sphygmomanometer and Stethoscope, do the following.
  - Adjust the cuff of the Sphygmomanometer by placing the compression bag over the inner aspect of the arm, approximately 1 inch above the elbow. Center the arrows marked on the cuff along the brachial artery. (Before the cuff is applied, squeeze out the excess air.)
  - Strap the Velcro sleeve band, and firmly secure it. Position the manometer at eye level.
  - Palpate the brachial artery at the bend of the elbow (antecubital area).
  - Squeeze the bulb to inflate the pressure cuff until the brachial artery can no longer be palpated. Then inflate the cuff to a mercury reading of 20 to 30 mm Hg above the point where the pulse disappeared.
  - Place the bell (or diaphragm) of the stethoscope over the resident's brachial artery where the pulse was palpated. (The bell of the stethoscope transmits low-pitched arterial blood sounds more effectively than the diaphragm.)



# **Blood Pressure**



- Insert the tips of the stethoscope in your ears, with the tips pointing down and forward.
- Slowly release the pressure valve on the inflation bulb, allowing the mercury to fall at a rate of 2-3 mm Hg a second. Listen for pulse sounds.
- Take the reading when the first sound is heard: this is the systolic pressure. Continue to release the pressure slowly, until the last pulsation is heard; this is the diastolic pressure.
- Allow the pressure to fall rapidly to zero, and remove the cuff.

#### Outcomes

Accurate readings of resident blood pressure will be obtained and documented.

Potential Risks/Side Effects and Appropriate Actions to Deal with them (include what to observe for and report, what to do, and whom to contact

- Avoid taking blood pressure readings on an injured arm, an arm with a shunt, an arm on the affected side of the mastectomy resident because blood flow may be compromised.
- Contact Nurse if unable to read blood pressure or if blood pressure exceeds the parameters ordered by physician/Nurse for individual resident.





### General Task: Blood Pressure

Signature of CAREGIVER	Signature of Delegating Nurse	Delegation Competency Review Date