



SV3
ID: _____
Date: ____ / ____ / _____

SV3 Blood Pressure Form

1. PREPARATION FOR BLOOD PRESSURE MEASUREMENTS

a. Time of blood pressure measurements..... _____ : _____
(Noon is 12 PM) AM 1
PM 2

b.

Circle Cuff size from SV1: 1 2 3 4

 Cuff size used..... Small adult (<24 cm) 1
Adult (24-32 cm) 2
Large adult (33-41 cm) 3
Thigh (42-52 cm) 4

c. Does cuff fit properly?..... Yes 1
No 2

WAIT 5 MINUTES SEATED

d. Resting 30-second pulse _____

e. Pulse obliteration pressure (POP)..... _____
+ 6 0

f. Random zero peak inflation level (PIL), minimum 180..... _____

g. Blood pressure device number..... _____

PIL

ID: _____

2. FIRST RANDOM ZERO BLOOD PRESSURE

SBP / DBP

- a. Uncorrected value..... /
- b. Zero value.....
- c. Corrected value (a-b)..... /

WAIT 30 SECONDS

3. SECOND RANDOM ZERO BLOOD PRESSURE

SBP / DBP

- a. Uncorrected value..... /
- b. Zero value.....
- c. Corrected value (a-b)..... /

4. COMPUTE SUM

- a. Sum of 2 SBPs and 2 DBPs (2c + 3c)..... /
- b. Sum of 4 SBPs and 4 DBPs from SV2 BP form (item #4c) /
- c. Sum of 6 SBPs and 6 DBPs (4a + 4b)..... /

5. DETERMINE BLOOD PRESSURE OUTCOME (check the first applicable box)

Ineligible: escape level 1 BP Sum of SBPs for this visit (4a) \geq 359 1
 Sum of DBPs for this visit (4a) \geq 219 2

If box 1 or 2 is checked: complete form #32 (escape level 1), participant is ineligible

Ineligible: escape level 2 BP Cumulative sum of SBPs (4c) \geq 957 5
 Cumulative sum of DBPs (4c) \geq 573 6

If box 5 or 6 is checked: complete form #32 (escape level 2), participant is ineligible

Ineligible: BP too low..... Cumulative sum of SBPs (4c) \leq 716 3
 Cumulative sum of DBPs (4c) \leq 476 4

If box 3 or 4 is checked: participant is ineligible

Eligible: Cumulative sum of SBPs (4c) 717-956, Cumulative sum of DBPs (4c) 477-572 7

Collected by (staff ID):	_____
Reviewed by (staff ID):	_____
Entered by (staff ID):	_____

SV3 Blood Pressure Form and Coding Instructions

Overview

The SV3 Blood Pressure Form is filled out by clinic staff and is used for blood pressure screening to determine eligibility of potential participants.

The SV3 Blood Pressure Form must be filled out during each SV3 visit. ID # labels should be printed and placed on the SV3 forms.

If data collected on this form indicates immediate exclusion, “ineligible” should be checked on the SV3 Visit Form (#15) for the SV3 Blood Pressure Form outcome (at the top). If blood pressure values are too high for eligibility, the BP escape-screening form (#32) should be completed.

If item 1c=No, all subsequent questions are left blank, participant is ineligible. If item 1c=Yes, ALL fields should be complete. If a field is missing or outside the normal range, the data system will reject the form.

Administration Instructions

Use correct version of form. The correct version will always be on the site workstation computer.

Place ID labels on pages 1 and 2.

Using a blue or black pen, fill out the visit date on page 1. Be sure to use a four digit year.

<u>Page</u>	<u>Question</u>	<u>Special Administration Instructions</u>
1	1	<p>Before the actual measurements are obtained, items a-g must be recorded. If there are any questions about preparing for or taking the measurements, refer to MOP Chapter 17.</p> <p>a. Record the time. The participant should be seated. Remember that noon is 12:00 pm. Mark appropriate box to indicate am or pm.</p> <p>b. In the large box, circle the cuff size used at SV1. Refer to the SV1 Blood Pressure form (#02), item #1b. Mark an "X" on the corresponding line indicating the <u>cuff size</u> used for SV3. The cuff size used at SV3 should be the same the cuff size used at SV1.</p> <p>c. Indicate here whether or not the cuff fits properly. If the brachial artery is occluded by the cuff, the participant is excluded from participating in PREMIER (see MOP Chapter 17). If this is so, check No, and check “ineligible” on the SV3 Visit Form (Form #15) for the SV3 Blood Pressure Form outcome (at the top). If the cuff fits properly, check Yes.</p> <p>WAIT 5 MINUTES SEATED</p> <p>d. Obtain and record the <u>resting 30-second</u> pulse (radial artery) by counting the number of beats in 30 seconds.</p>

<u>Page</u>	<u>Question</u>	<u>Special Administration Instructions</u>
1	1 e.	Connect the cuff to a standard mercury sphygmomanometer to establish and record the pulse obliteration pressure (the pressure at which the radial pulse can no longer be felt).
	f.	Add 60 to the pulse obliteration pressure to obtain the <u>random zero peak inflation level</u> (PIL) and record the result. If this value is less than 180, enter 180. Also, record the PIL on page 2 in the upper left hand corner.
	g.	Record the device number for the blood pressure machine you will be using to take the blood pressure. This is a two digit field, use leading zeros as appropriate.
2	2 a.	Obtain a sitting blood pressure measurement using the random-zero device and record the reading. If the meniscus is exactly between the lines, round up to the nearest even number. Use leading zeros if less than 100.
	b.	Record the zero value. If the meniscus is exactly between the lines, round up to the nearest even number. Use a leading zero if less than 10.
	c.	Do Items 3a and 3b first. Then follow instructions for Item #3c. Wait 30 seconds
	3 a.	Repeat item #2a.
	b.	Repeat item #2b.
	c.	AFTER MEASUREMENTS ARE OBTAINED FOR #2a and #3a, subtract the zero values from the corresponding blood pressure measurement readings with a hand calculator. Record the resulting corrected value for both the SBP and DBP values. If the DBP goes to 0mmHg during the 5th phase, repeat the measurement recording the 4th phase DBP. If you don't hear the 5th phase DBP on the repeat measurement, then use the 4th phase DBP. Use a leading zero if the value is less than 100.
	4 a.	Add the values from lines 2c and 3c together and record the sum on line #4a. The sum should be an even number. Use a leading zero if the value is less than 100.
	b.	Record the sum of the SV2 SBP's and DBP's from the SV2 Blood Pressure form (#09), item #4c.
	c.	Add the sums of the SBP's and DBP's from items #4a and #4b and record on line #4c.
	5	Using the sum value from item #4c, check the first applicable box. If ineligible, check "ineligible" on the SV3 visit form (#15) for the SV3 Blood Pressure Form outcome (at the top). If eligible, check "eligible" on the SV3 visit form for the SV3 Blood Pressure Form outcome. If the BP escape levels are reached, the participant needs to be referred for medical counseling and the BP escape-screening form (#32) should be filled out. Refer to MOP Chapter 23 for details and complete form #32.

Coding Instructions

All corrections are made by first making a slash through the incorrect entry and writing the correct entry next to it. Then, alongside the corrected entry, write your initials, the date of the correction and a note about why the correction was made (e.g., RL, 4/30/99, incorrect ID).

When filling out the “Collected by”, “Reviewed by”, and “Entered by” box, be sure to use the correct staff ID number. The “Entered by” staff ID # should not be written until the form is entered.

Review Instructions

If the participant is INELIGIBLE (Q1c = No **or** Q5 = ANY box marked EXCEPT 7), mark as ineligible on the SV3 Visit form (#15) for the SV3 Blood Pressure Form outcome.

Check for correct calculations in items 1f, 2c, 3c, 4a, and 4c.

If the participant is ELIGIBLE (Q5 = box #7 marked), check the following items:

- Page 1 should be dated.
- Pages 1-2 should have correct ID# labels.
- Page 1:
 - items 1a-b and 1d-g should be completed;
 - item 1c should be coded as Yes;
- Page 2:
 - items 2, 3 and 4 should be completed;
 - item 4c should be within the range allowed for blood pressure shown in the last option for item 5, the eligible line;
 - item 5 should have box 7 marked.
- **All pages:** all corrections should be explained, initialed, and dated. Correction should be made in a different color pen than was used in filling out the form. It is suggested that you use red or green.
- If all of the above items look acceptable, enter your Staff ID in the “reviewed by” section at the bottom of page 2, and enter “eligible” on the SV3 Visit form (#15) for the SV3 Blood Pressure Form outcome (at the top).

Additional Instructions

Use the cuff size obtained at SV1 to record all of a participant’s blood pressure measurements during screening.