

<b>Document Title:</b>	Blood Pressure Competency Project 3.b.i
<b>Approving Committee:</b>	Clinical Integration
<b>Approval Date:</b>	TBD
<b>Document Objective/Summary:</b>	This document serves to outline the PPS expectations for partners in the Cardiovascular 3.b.i project for measuring BP competency

A blood pressure measurement competency should be performance on all medical assistant staff who are taking blood pressure measurements in the office. This competency should be completed on an annual basis and documentation be made available as requested by the PPS, NYS DOH, and/or the DSRIP IA. The PPS has created a competency checklist for both manual blood pressure measurements and automated blood pressure measurements. PPS partners participating in this project can utilize either the PPS competency forms or their own versions provided that they include all steps for completing the measurement.

**NYP/Q PPS Competency**  
Automatic Blood Pressure Measurement

Name: \_\_\_\_\_

Center: \_\_\_\_\_

**DIRECTIONS: Observer must √ each step and sign that observation was completed**

	Observation #1	Observation #2	Observation #3
1. Gather equipment and wash hands			
2. Identify the patient by using two unique identifiers by asking their full name and date of birth; comparing with patient's medical record			
3. Explain the procedure to the patient			
4. Position patient in a relaxed and comfortable position			
5. Expose patient's upper arm: above the elbow, with the palm up			
6. Palpate the location of the brachial artery			
7. Select the appropriate BP size cuff			
8. Place the bladder of BP over the brachial artery			
9. Apply the cuff on the bare arm, midway between the shoulder and the elbow			
10. Position the alignment mark on the cuff directly over the brachial artery			
11. Press the "Start" button to take the BP			
12. Wait for the monitor to inflate the cuff automatically			
13. Record the BP measurement that is displayed in the window			
14. Release the remaining air in the cuff and remove the cuff			
15. Document BP in patient's medical records			
16. Notify provider if any abnormal BP reading			
17. Decontaminate reusable equipment using approved cleaning wipe			
18. Wash hands			

OBSERVATION #1: Signature/Title/Date: \_\_\_\_\_

OBSERVATION #2: Signature/Title/Date: \_\_\_\_\_

OBSERVATION #3: Signature/Title/Date: \_\_\_\_\_

**NYP/Q PPS Competency**  
**Manual Blood Pressure Measurement**

Name: \_\_\_\_\_

Center: \_\_\_\_\_

**DIRECTIONS: Observer must √ each step and sign that observation was completed**

	Observation #1	Observation #2	Observation #3
1. Gather sphygmomanometer and stethoscope			
2. Select the appropriate BP size cuff			
3. Wash hands			
4. Identify the patient by using two unique identifiers by asking their full name and date of birth; comparing with patient's medical record			
5. Explain the procedure to the patient, using language that she/he can understand			
6. Position patient in a relaxed and comfortable position			
7. Expose patient's upper arm: above the elbow, with the palm of the hand up			
8. Palpate the location of the brachial artery			
9. With the valve of the inflation bulb open, squeeze all air from the bladder			
10. Apply the cuff on the bare arm, midway between the shoulder and the elbow			
11. Position the alignment mark on the cuff directly over the brachial artery			
12. Place the head of the stethoscope directly over the palpated pulse			
13. Inflate the cuff			
14. Slowly deflate the cuff			
15. Note the Systolic Pressure: The first sharp rhythmic sound			
16. Continue to release pressure and note the Diastolic Pressure: Where the last sound is heard			
17. Release the remaining air in the cuff and remove the cuff			
18. Document BP in patient's medical records			
19. Notify provider if any abnormal BP reading			
20. Decontaminate reusable equipment using approved cleaning wipe			

OBSERVATION #1: Signature/Title/Date: \_\_\_\_\_

OBSERVATION #2: Signature/Title/Date: \_\_\_\_\_

OBSERVATION #3: Signature/Title/Date: \_\_\_\_\_