

## How to measure a lying and standing blood pressure (BP) as part of a falls assessment

1. Identify if you are going to need assistance to stand the patient and simultaneously record a BP
2. Use a manual sphygmomanometer
3. Explain the procedure to the patient

0 min

Ask the patient to lie down for **at least five (5) minutes**

5 min

Measure the BP

*(If SBP is in the Yellow or Red Zone follow response instructions and escalate as per local CERS – do not continue with postural BP)*



0 -1 min

Ask the patient to stand up (assist if needed)

Measure BP after standing in the **first minute**



3 mins

Measure the BP again after the patient has been standing for **three (3) minutes**



- ⊕ Repeat recording if BP at 3 minutes is lower than the BP in the first minute
- ⊕ If there is a positive result, repeat test with the next routine observations until resolved
- ⊕ If symptoms change, repeat the test



### A positive result is:

- a. A drop in systolic BP of 20mmHg or more (with or without symptoms)
- b. A drop to below 90mmHg on standing even if the drop is less than 20mmHg (with or without symptoms)
- c. A drop in diastolic BP of 10mmHg with symptoms (although clinically less significant than a drop in systolic BP)

Document symptoms including dizziness, light-headedness, vagueness, pallor, visual disturbances, feelings of weakness and palpitations.

Advise the patient of results and if the result is positive:

- a. Take immediate action to prevent falls and/or unsteadiness
- b. Inform the medical and nursing team - if required activate the local CERS protocol

*If on standing the SBP enters the Red Zone, re-position the patient and repeat a full set of observations*

⊕ *If SBP remains in the Red Zone activate a Rapid Response as per local CERS*

⊕ *If SBP enters the Yellow or White Zone call a Clinical Review -these patients have a positive result and require a medical review*