PURPOSE:
To obtain mean blood pressure (BP) of an infant.

CONSIDERATIONS:
1. The Korotkoff sounds are not heard over the brachial artery in infants.
2. Measurement of blood pressure provides baseline data and may indicate cardiovascular problems.
3. BP is most easily and accurately assessed using an electronic blood pressure machine that uses oscillometry or with palpation.
4. The appropriate sized cuff will provide the most accurate reading. The cuff width to arm ratio should be 45-70%.
5. Oscillometry readings are most reliable when mean arterial pressure is greater than 40 mm Hg.
6. Best results are obtained when infant is quiet or sleeping.
7. Crying may raise the systolic pressure of an infant. Crying is a normal response for an infant.
8. DO NOT measure blood pressure in an extremity with damaged or altered blood flow or an IV.
9. If using a manual BP cuff, an accurate systolic reading can be obtained by palpation of:
   a. Brachial artery if using upper arm.
   b. Radial artery, if using lower arm.
   c. Dorsalis pedis or posterior fibial arteries, if using calf.
10. A diastolic pressure reading cannot be measured when obtaining a manual BP by palpation.

EQUIPMENT:
Blood pressure cuff - appropriate size for age
Sphygmomanometer
Electronic BP machine

PROCEDURE:
1. Adhere to Standard Precautions.
2. Identify patient and explain procedure to caregiver.
3. Properly sized cuff is placed around the infant's upper arm, lower arm or calf.
4. Expose extremity to be used for BP measurement while maintaining proper body temperature of infant.
5. If using manual cuff, locate appropriate artery.
6. Inflate cuff to 20-30 mm Hg above where pulse no longer palpable or above expected systolic pressure.
7. The cuff pressure is decreased at a rate of 2-3 mm Hg while palpating for pulse.
8. Continue to release pressure until pulse is palpable. This is the systolic pressure reading.
9. The diastolic pressure is recorded as “P.”
10. Deflate cuff rapidly and completely; remove from arm.
11. Wait 2 minutes before taking another blood pressure.

AFTER CARE:
1. Document in patient's record:
   a. Blood pressure reading and extremity used.
   b. Patient's response to procedure.
   c. Instructions given to caregiver.
   d. Contact physician if noted to be hypertensive or there is a significant change. Presence of hypertension can be a sign of a significant underlying problem.