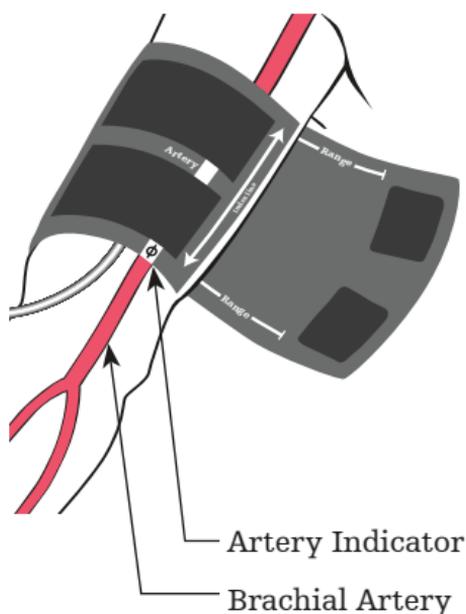


Placement of NIBP Cuff*

- Check that patient's clothing sleeve is not rolled or pushed up tightly so that it creates a tourniquet effect above the blood pressure cuff
- Ensure proper cuff size:
 - Too small, readings will be high
 - Too large, readings will be low
- Align artery index over brachial artery
- Ensure that "Index Line" is within Range indicator on inside of cuff
- Place 1" above the elbow
- 2 fingers should be able to fit between cuff and patient's arm
- Keep patient's upper arm at heart level (4th intercostal space, halfway between anterior-posterior diameter)
 - If below heart, readings will be high
 - If above heart, readings will be low



Quick Tips for an **Accurate NIBP Reading**

- Obtain an auscultatory manual BP as a baseline reading
- Keep patient as warm and calm as possible, with fists unclenched
- Avoid taking pressure if patient is shivering, has muscle tremors or is tensing arm muscles
- Don't let arm hang at patient's side, support if necessary with pillow/blanket under elbow
- Ask patient not to move or speak during procedure
- Prevent tubing from bumping other surfaces
- Avoid excessive stretching or pinching of hoses (including wrapping hose around cot or looping it to a fixed item—especially ones that can conduct noise/vibration)
- Clinical conditions that can affect NIBP readings:
 - patient low perfusion states
 - heart arrhythmias
- Similar to ECG monitoring, NIBP errors are more likely to occur in high motion/vibration environments (e.g., rough, bumpy roads)