

# Ankle-Brachial Blood Pressure Form

FORM CODE: ABB

VERSION A 08/07/2000

ID NUMBER: CONTACT YEAR:

LAST NAME: INITIALS:

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| INSTRUCTIONS: This form should be completed during the participant’s clinic visit. ID Number, Contact Year, and Name must be entered above. Whenever numerical responses are required, enter the number so that the last digit appears in the rightmost box. Enter leading zeroes where necessary to fill all boxes. If a number is entered incorrectly, mark through the incorrect entry with an "X". Code the correct entry clearly above the incorrect entry. For "multiple choice" and "yes/no" type questions, circle the letter corresponding to the most appropriate response. If a letter is circled incorrectly, mark through it with an "X" and circle the correct response. |

“You will have blood pressures checked in your arms and legs. The method used to do this is

similar to standard blood pressure measures. An ultrasound device will be used allowing you to

hear the blood flow while the blood pressure is taken. There is no more discomfort involved beyond

having a blood pressure cuff placed on your arms and ankles.”

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**A. EXCLUSIONS**

1a. Does the participant have any open wounds in the

Exclude;

Go to Item 25

Exclude;

Go to Item 25

Exclude;

Go to Item 25

Exclude;

Go to Item 25

ankle or arm cuff area? …………………………………………………………… Yes Y

No N

1b. Has the participant undergone bilateral amputation? ……………… Yes Y

No N

1c. Is the participant unable to lay at <45 degree angle? ……………… Yes Y

No N

1d. Has the participant had a double mastectomy? ……………………… Yes Y

No N

### B. MEASURES

2. Arm cuff size: ………………………………………………… Small adult (< 24 cm) S

Regular adult (24-32 cm) R

Large adult (33-41 cm) L

Thigh (>41 cm) T

Go to Item 4a

3a. Arm used [RIGHT PREFERRED]: ………………………………………………. Right R

Left L

3b. Explain why right arm was not used:

4a. Right ankle cuff size: ……………………………….………. Small adult (< 24 cm) S

Regular adult (24-32 cm) R

Large adult (33-41 cm) L

Thigh (>41 cm) T

4b. Left ankle cuff size: ………………………………….. Small adult (< 24 cm) S

Regular adult (24-32 cm) R

Large adult (33-41 cm) L

Thigh (>41 cm) T

5. Doppler systolic: ……………………………………………………………………..

[\*ADD 30 TO GET MAXIMAL INFLATION LEVEL]

+30 mm Hg\*

6. Maximal inflation level: …………………………………………………………….

7. Brachial: ………………………………………………………………………………. mm Hg

8. Right posterior tibia: ……………………………………………………………….. mm Hg

9. Left posterior tibia: ………..……………………………………………………….. mm Hg

10. Left posterior tibia: ………………………………………………………………… mm Hg

11. Right posterior tibia: ………………………………………………………………. mm Hg

12. Brachial: ………..…………………………………………………………………….. mm Hg

Go to Item 15

13. Was the first arm blood pressure measurement obtained? ………………. Yes Y

No N

14. Identify all reasons the first arm blood pressure

measurement was not obtained.

Yes No

First arm: …………………………………. 14a. Unable to occlude: ………… Y N

14b. Unable to locate artery: ….. Y N

Go to Item 15

14c. Other (please specify): ……. Y N

14d. Specify:

15. Was the first right ankle blood pressure measurement

Go to Item 17

obtained? ……………………………………………………………………………. Yes Y

No N

16. Identify all reasons the first right ankle blood pressure

measurement was not obtained.

Yes No

First right ankle: …………………………16a. Unable to occlude: ………… Y N

16b. Amputation: ………………... Y N

16c. Unable to locate artery: ….. Y N

Go to Item 17

16d. Other (please specify): …… Y N

16e. Specify:

17. Was the first left ankle blood pressure measurement

Go to Item 19

obtained? ……………………………………………………………………………. Yes Y

No N

18. Identify all reasons the first left ankle blood pressure

measurement was not obtained.

Yes No

First left ankle: ………………………….. 18a. Unable to occlude: ……….. Y N

18b. Amputation: ………………... Y N

18c. Unable to locate artery: ….. Y N

Go to Item 19

18d. Other (please specify): …… Y N

18e. Specify:

19. Was the second left ankle blood pressure measurement

Go to Item 21

obtained? ……………………………………………………………………………. Yes Y

No N

20. Identify all reasons the second left ankle blood pressure

measurement was not obtained.

Yes No

Second left ankle: ………………………. 20a. Unable to occlude: ………… Y N

20b. Amputation: ………………... Y N

Go to Item 21

20c. Unable to locate artery: ….. Y N

20d. Other (please specify): ……. Y N

20e. Specify:

21. Was the second right ankle blood pressure measurement

Go to Item 23

obtained? ……………………………………………………………………………. Yes Y

No N

22. Identify all reasons the second right ankle blood pressure

measurement was not obtained.

Yes No

Second right ankle: …………………….. 22a. Unable to occlude: ………… Y N

22b. Amputation: ………………... Y N

22c. Unable to locate artery: ….. Y N

Go to Item 23

22d. Other (please specify): …… Y N

22e. Specify:

23. Was the second arm blood pressure measurement

Go to Item 25

obtained? ……………………………………………………………………………. Yes Y

No N

24. Identify all reasons the second arm blood pressure

measurement was not obtained.

Yes No

Second arm: ……………………………… 24a. Unable to occlude: ……….. Y N

24b. Unable to locate artery: ….. Y N

Go to Item 25

24c. Other (please specify): ……. Y N

24d. Specify:

#### ADMINISTRATIVE INFORMATION

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25. Date of data collection: ……………………….

m m d d y y y y

26. Method of data collection: ……………………………………………… Computer C

Paper form P

27. Code number of person completing this form: …………………………………..