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 if possible and definitely if the automatic machine fails to record.
3. Explain the procedure to the patient.

<table>
<thead>
<tr>
<th>Lying</th>
<th>Standing</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 min</td>
<td>0 - 1 min</td>
</tr>
<tr>
<td>Ask the patient to lie down for at least five minutes.</td>
<td>Ask the patient to stand up (assist if needed).</td>
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<tr>
<td>Measure the BP.</td>
<td>Measure BP after standing in the first minute.</td>
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</table>

In the instance of positive results, repeat regularly until resolved.
If symptoms change, repeat the test.

Notice and document symptoms of dizziness, light-headedness, vagueness, pallor, visual disturbance, feelings of weakness and palpitations.

Advise patient of results and if the result is positive:

a. inform the medical and nursing team.
b. take immediate actions to prevent falls and/or unsteadiness.

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).