

OMB NO=0925-0216 12/31/2007

SYSTOLIC BLOOD PRESSURES BY DOPPLER (to be taken in the following order with participant supine after 5 minutes of rest)

h624	Examiner's Number for Doppler Ankle Brachial Blood Pressure	
h625	Cuff size, arm	0= pediatric, 1= regular adult
h626	Cuff size, ankle	2= large adult, 3= thigh

h627	Right arm	
h628	Right ankle	300 = ≥ 300
h629	Left ankle	999 = Unknown or not done
h630	Left arm	

REPEAT SYSTOLIC BLOOD PRESSURE MEASUREMENTS (reverse order)

h631	Left arm	
h632	Left ankle	300= ≥ 300
h633	Right ankle	999= Unknown or not done
h634	Right arm	

THIRD SYSTOLIC BLOOD PRESSURE MEASUREMENT (order as in repeat SBP). To be obtained if initial and repeat SBP at any site differ by more than 10 mmHg

h635	Left arm	
h636	Left ankle	300= ≥ 300
h637	Right ankle	999= Unknown or not done
h638	Right arm	

h639	Right Ankle blood pressure site	0= posterior tibial (ankle)
h640	Left Ankle blood pressure site	1= dorsalis pedis (foot)

EXCLUSIONS:

Right	Left	
h641	h642	Lower Extremity Exclusions 0= None, 1= venous stasis ulceration, 2= amputation, 3= other_____
h643	h644	Upper Extremity Exclusions 0= None, 1=Mastectomy, 3=Other_____

h645	Protocol modification, write in. _____ _____ _____	0= No, 1= Yes 2=Incomplete/ refused
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