



Trials of Hypertension Prevention  
(TOHP), supported by the National  
Heart, Lung, and Blood Institute,  
National Institutes of Health

SV1  
ID number \_\_\_\_\_  
Initials \_\_\_\_\_  
Visit Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**TRIALS OF HYPERTENSION PREVENTION  
Screening Form #1**

1. Date of birth ..... \_\_\_\_/\_\_\_\_/\_\_\_\_  
month      day      year
2. Sex ..... Male \_\_\_\_ (1) Female \_\_\_\_ (2)
3. Race ..... White \_\_\_\_ (1) Hispanic \_\_\_\_ (2)  
Black \_\_\_\_ (3) Asian \_\_\_\_ (4)  
Other \_\_\_\_ (5)  
(specify \_\_\_\_\_)

**4. PREPARATION FOR BLOOD PRESSURE MEASUREMENTS**

WAIT FIVE MINUTES SEATED

- a. Cuff size ..... Small adult (<24 cm) \_\_\_\_ (1) Adult (24-32 cm) \_\_\_\_ (2)  
Large adult (33-41 cm) \_\_\_\_ (3) Thigh (>41 cm) \_\_\_\_ (4)
- b. Resting 30-second pulse ..... \_\_\_\_ /30 seconds
- c. Pulse obliteration pressure (POP) ..... \_\_\_\_ mm Hg  
+ 6 0
- d. Random zero peak inflation level (PIL) ..... \_\_\_\_ mm Hg
5. First random zero blood pressure SBP/DBP
- a. Uncorrected value ..... \_\_\_\_ / \_\_\_\_ mm Hg
- b. Zero value ..... \_\_\_\_
- c. Corrected value (a - b) ..... \_\_\_\_ mm Hg

WAIT 30 SECONDS

6. Second random zero blood pressure SBP/DBP
- a. Uncorrected value ..... \_\_\_\_ / \_\_\_\_ mm Hg
- b. Zero value ..... \_\_\_\_
- c. Corrected value (a - b) ..... \_\_\_\_ mm Hg

WAIT 30 SECONDS

7. Third random zero blood pressure SBP/DBP
- a. Uncorrected value ..... \_\_\_\_ / \_\_\_\_ mm Hg
- b. Zero value ..... \_\_\_\_
- c. Corrected value (a - b) ..... \_\_\_\_ mm Hg
8. Sum of 3 SBPs and 3 DBPs, items 5c + 6c + 7c ..... \_\_\_\_ mm Hg

IF THE SUM OF 3 DBPs IS OUTSIDE THE RANGE 243-293 mmHg, THE  
CANDIDATE IS **INELIGIBLE**. TERMINATE THE INTERVIEW.

9. Height ..... \_\_\_\_ inches  
Staff ID \_\_\_\_\_
10. Weight ..... \_\_\_\_ lbs.  
Refer to Height/Weight chart to confirm eligibiity. If outside range listed,  
candidate is ineligible. Staff ID \_\_\_\_\_

**IF ELIGIBLE, ASK IF WILLING TO LOSE AT LEAST 10 LBS. IF ASSIGNED WEIGHT LOSS**

11. Is candidate eligible and willing to continue to SV2? ..... Yes \_\_\_\_ (1) No \_\_\_\_ (2)  
If No, reason \_\_\_\_\_

Staff use \_\_\_\_\_

Editor ID \_\_\_\_\_