

Participant Id#:						
Acrostic:						
Date:	Month Day	/ Year				

Pulse Obliteration Pressure

Inflate the cuff slowly until the pulse is no longer audible. Inflate to 30 mm Hg above the level at which pulse sound disappeared.

1. Systolic Readings: (Record in this order)

<u>Right</u>	Systolic	<u>Left</u>	Systolic		
Brachial		Posterior Tibial			
Dorsalis Pedis		Dorsalis Pedis			
Posterior Tibial		Brachial			

- 2. Procedure was:
 - O Completed successfully -> skip to Tech ID
 - O Not completed continue to Q3
- 3. Reason procedure was not completed:

Right Side	Amputation	Discomfort	Ulceration/ Lesion	<u>Other</u>	If other, please specify:
Brachial	0	0	0	0	
Dorsalis Pedis	0	0	0	0	
Posterior Tibia	1 0	0	0	0	
<u>Left Side</u>					
Brachial	0	0	0	0	
Dorsalis Pedis	0	0	0	0	
Posterior Tibia	1 0	0	0	0	
Tech ID#:		R	eviewer ID#:		Data Entry ID#:

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