

HOME BLOOD PRESSURE MEASUREMENTS

Patient name: _____ DOB: _____

Instructions:

Follow these steps every morning and evening for one week:

1. Sit down with your feet flat on the ground and your arm resting on a table or chair at the level of your chest.
2. Measure your blood pressure once and discard the reading (do not write it down).
3. After five minutes at rest, measure your blood pressure. Record this reading (No.1).
4. After five minutes measure your blood pressure again. Record this reading (No.2).

	Morning	Evening	Notes
Day 1	1. / _____	1. / _____	
Date:	2. / _____	2. / _____	
Day 2	1. / _____	1. / _____	
Date:	2. / _____	2. / _____	
Day 3	1. / _____	1. / _____	
Date:	2. / _____	2. / _____	
Day 4	1. / _____	1. / _____	
Date:	2. / _____	2. / _____	
Day 5	1. / _____	1. / _____	
Date:	2. / _____	2. / _____	