Home Blood Pressure Diary

Name:

Date of Birth:

Name of Clinician requesting this information:

Please monitor and record your blood pressure at home for 7 consecutive days (minimum 5).

In the notes section, write down anything that could affect your reading, such as feeling unwell or changes to your medication.

**Remember to bring this diary with you to your next appointment/review**

When to measure:

* Monitor your blood pressure in the morning and evening at roughly the same time.
* Measure your morning blood pressure before you take your medication.
* Don’t exercise, smoke, eat or drink caffeine in the 30 minutes before measurements

Measuring blood pressure:

* **DO** sit quietly for 5 minutes before starting measurements (no TV, talking, reading, phone use)
* **DO** sit with feet flat on the floor, legs uncrossed, upper arm bare, back and arm supported with upper arm at the level of the heart.
* **DO** write down the numbers in the table below **exactly** as they appear on the monitor screen- do not round them up or down.
* **DO** take a take a minimum of two readings, leaving at **least a minute** between each. If the first two readings are very different, take 2 or 3 further readings. Write down the average of the last 2 readings. Note the number taken.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Date | AM (6am-12midday) | | | PM (6pm – 12midnight) | | | Notes |
| Readings | | Average | Readings | | Average |
| Example | 07/08/2018 | 1: | 152/81 | 158/87 | 1: | 174/62 | 170/69 | e.g. Exercised shortly before PM reading |
| 2: | 164/93 | 2: | 166/76 |
| Day 1 |  | 1: | / | / | 1: | / | / |  |
| 2: | / | 2: | / |
| Day 2 |  | 1: | / | / | 1: | / | / |  |
| 2: | / | 2: | / |
| Day 3 |  | 1: | / | / | 1: | / | / |  |
| 2: | / | 2: | / |
| Day 4 |  | 1: | / | / | 1: | / | / |  |
| 2: | / | 2: | / |
| Day 5 |  | 1: | / | / | 1: | / | / |  |
| 2: | / | 2: | / |
| Day 6 |  | 1: | / | / | 1: | / | / |  |
| 2: | / | 2: | / |
| Day 7 |  | 1: | / | / | 1: | / | / |  |
| 2: | / | 2: | / |

Advice on BP Monitor choice: <https://bihsoc.org/bp-monitors/>

Advice on BP measurement at home: <https://bihsoc.org/resources/bp-measurement/hbpm/>