

Spencer House St Paul's Square Carlisle CA1 1DG 01228 588121 www.carlislehealthcare.co.uk

Home Blood Pressure Record Sheet

Name	
Date of Birth	
NHS Number	

Please monitor and record your blood pressure at home for 7 consecutive days (unless you have been advised otherwise). On each day, monitor your blood pressure on two occasions in the morning (between 6am and 12noon) and again in the evening (between 6pm and midnight). On each occasion 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. Use the table below to record all of your blood pressure readings. The numbers you write down should be the same as those that appear on the monitor screen. Remember to take this diary with you to your next appointment/review.

Dat e	Tim e	Systolic	Diastolic	Systolic	Diastolic	Puls e
		(upper value)	(lower value)	(upper	(lower value)	
		First reading	First reading	value)		

		I	 I	 I
Total				
Total Mean				
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Checked by GP Scanned to medical record