

BP@Home Diary

Name:

DOB:

Arm used: Left Right (please use the same arm each time you do a reading)

Make/Model of monitor used: Size of cuff: Small Medium Large

Please monitor and record your blood pressure at home for 4 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 your blood pressure readings. The numbers you write down should be the same as those on the monitor screen - do not round the numbers up or down. In the comments section, you should also write down anything that could have affected your reading, such as feeling unwell or changes in your medication. You do not need to record your pulse/heart rate.

Day:	Time:	1 st Reading:	2 nd Reading	Notes:
<u>Example:</u> Date: 10/07/23	10.03am	129 86	135 82	Felt a bit dizzy
Day 1 – AM Date:				
Day 1 – PM				
Day 2 – AM Date:				
Day 2 – PM				
Day 3 – AM Date:				
Day 3 – PM				
Day 4 – AM Date:				
Day 4 – PM				