# Your Home Blood Pressure Recordings Chart

### Please tell us your full name:

### Please tell us your date of birth:

### Date of your first reading:

**Instructions**:

Please record your blood pressure twice each day, ideally in the morning and evening,

continuing for at least 4 days, ideally for 7 days.

For each blood pressure recording take two readings at least 1 minute apart whilst seated using a blood pressure machine cuff that goes around the upper arm (above the elbow).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Day | Morning Readings | | Evening Readings | |
| Reading 1 | Reading 2 | Reading 1 | Reading 2 |
| 1 | **/** | **/** | **/** | **/** |
| 2 | **/** | **/** | **/** | **/** |
| 3 | **/** | **/** | **/** | **/** |
| 4 | **/** | **/** | **/** | **/** |
| 5 | **/** | **/** | **/** | **/** |
| 6 | **/** | **/** | **/** | **/** |
| 7 | **/** | **/** | **/** | **/** |

Please return this to the medical centre via email [sheccg.gleadlessmc@nhs.net](mailto:sheccg.gleadlessmc@nhs.net), the post box or at reception **and arrange for a GP phone call to discuss the results.**

**Instructions for Staff at Gleadless Medical Centre:**

Please enter the above data in to the Excel spread sheet found on the intranet at:

Location: **GP TeamNet:** Home Blood Pressure Monitoring Log & Calculator.xls

Enter the average blood pressure value into the patient’s records on EMIS Web (codes: 246d / 246c)