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Home blood pressure record

Patient Name:
Date of Birth:
Address:

In the week before your next clinic appointment take your blood pressure twice a day for **seven days**
 Record morning and evening blood pressures, taking two or three readings each time.

Example: Date & time	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	Averages
Day 1	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	
Day 2	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	
Day 3	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	
Day 4	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	
Day 5	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	
Day 6	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	
Day 7	am 1 _____/_____ 2 _____/_____ 3 _____/_____	pm 1 _____/_____ 2 _____/_____ 3 _____/_____	

Average of ____ days readings =

To ensure that the readings you take are accurate please follow these simple instructions:

- Always sit in a chair for 5 minutes before taking your blood pressure with your feet flat on the floor.
- Ensure that the cuff is placed in the correct position on your arm. You can use either arm, but we suggest that you always use the same arm.
- Rest your arm on a table or chair arm, in a comfortable supported position ensuring that the cuff is level with your heart.
- Measure your blood pressure **twice a day taking two or three readings each time, separate these readings by about 30 seconds to 1 minute.**
- Keep a record of the readings on this sheet.
- Don't rush when taking your blood pressure.
- Don't talk or move while taking your blood pressure.
- Empty your bladder before taking your blood pressure.
- Avoid taking your blood pressure for 30 minutes to 1 hour after:
 - An exercise session
 - Drinking a strong black coffee (filter)
 - A large meal
 - Getting out of bed in the morning
 - Smoking a cigarette

Note- We can only accept 7 days of readings and all relevant information must be recorded within the relevant templates. If this is not completed correctly then you will be required to repeat the test.