

Blood Pressure Monitoring Form

Print out and fill in this form to monitor your blood pressure at home, over 5-7 consecutive days. It can also be used if the GP or Nurse requests a blood pressure check.

To get the most accurate reading when taking your blood pressure at home, make sure you do the following:

1. Sit down with your back supported, and your legs uncrossed.
2. Roll up your sleeve, or remove items of long-sleeved clothing, so the cuff can be placed around your upper arm.
3. Support your arm, e.g. with a cushion or the arm of a chair, so your arm is at the same height as your heart.
4. Try and relax and avoid talking while the reading is being carried out.

Please ensure you wait at least 2 minutes between the two readings.

Once the form is complete you can either drop it into reception, or post it to:

Felmores Medical Centre,
Felmores End,
Basildon.
SS13 1PN

***Please make sure you fill in your Name and Date of Birth on the
Blood Pressure Form***

Name	
DoB	
NHS No.	

Start Date	Time	Morning (1st)		Morning (2nd)		Time	Afternoon (1st)		Afternoon (2nd)	
		Upper (systolic)	Lower (diastolic)	Upper (systolic)	Lower (diastolic)		Upper (systolic)	Lower (diastolic)	Upper (systolic)	Lower (diastolic)
Day 1										
Day 2										
Day 3										
Day 4										
Day 5										
Day 6										
Day 7										

Average	Morning		Afternoon	
	Upper (systolic)	Lower (diastolic)	Upper (systolic)	Lower (diastolic)