

**Blood Pressure Readings**

|  |  |
| --- | --- |
| **Name:** | **Date of Birth:** |
| **Date of Return:** | |

Please take your blood pressure readings **twice a day for the next 7 days** and return this form to the surgery or by email to [orchid.house@nhs.net](mailto:orchid.house@nhs.net)

**THIS MUST BE COMPLETED**

(with the blood pressure machine if it was **borrowed** from us)

1. In the morning, ensure you are rested and have taken no exercise in the last 30 minutes.
2. Sit in a chair comfortably upright with your arm supported on a table beside you, with both feet on the ground.
3. Put the cuff on your upper arm (5cm above your elbow) resting on the table, the cuff should be roughly at the level of your heart.
4. Press the on/off button on the BP monitor
5. Record the reading below with your pulse rate and any comments.
6. Repeat in the evening and for a total of seven days.
7. We will return your £10 deposit upon receipt of the machine

**Example:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **DATE** | **1st Blood**  **Pressure**  **(mm/Hg)** | **1st Pulse**  **(beats per**  **Minute)** | **2nd Blood**  **Pressure**  **(mm/Hg)** | **2nd Pulse**  **(beats per**  **Minute)** | **Comments** |
| 10/9/24 | 131 / 74 | 100 | 122 / 81 | 96 |  |

How to Calculate:

1. Add all they systolic numbers together (1st number)
2. Divide by how many there are total
3. Add all the diastolic numbers together (2nd number)
4. Divide by how many there are total
5. Do not count the first day of readings as these are usually high

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **DATE** | **1st Blood Pressure**  **(mm/Hg)** | **1st Pulse**  **(beats per**  **minute)** | **2nd Blood Pressure**  **(mm/Hg)** | **2nd Pulse**  **(beats per**  **minute)** | **Comments** |
| Day 1 AM | / |  | / |  |  |
| PM | / |  | / |  |  |
| Day 2 AM | / |  | / |  |  |
| PM | / |  | / |  |  |
| Day 3 AM | / |  | / |  |  |
| PM | / |  | / |  |  |
| Day 4 AM | / |  | / |  |  |
| PM | / |  | / |  |  |
| Day 5 AM | / |  | / |  |  |
| PM | / |  | / |  |  |
| Day 6 AM | / |  | / |  |  |
| PM | / |  | / |  |  |
| Day 7 AM | / |  | / |  |  |
| PM | / |  | / |  |  |

|  |  |
| --- | --- |
| **AVERAGE READING** |  |