

Home Blood Pressure Monitoring (HBPM)

Dr/Nurse requesting _____ Patient Name _____ Date of Birth _____

Please record your BP by taking 2 consecutive measurements (one minute apart) when seated comfortably. This needs to be repeated once in the morning (2nd reading taken about 1 minute later) and again in the evening (2nd reading taken about 1 minute later.) Please record these readings below and then return the form to the practice.

It would be helpful to us if you can work out the average of all readings - except the first day which needs to be excluded from this 'average' calculation (the greyed out boxes) and make a note below, but don't worry if this is not possible for you to calculate, as we can work out the average reading for you.

Systolic = higher value & Diastolic = lower value. e.g. a BP of 140/80 is 140 Systolic & 80 Diastolic

	1 st AM Reading		2 nd AM Reading		1 st PM Reading		2 nd PM Reading	
	Col A	Col B	Col C	Col D	Col E	Col F	Col G	Col H
Day	Systolic	Diastolic	Systolic	Diastolic	Systolic	Diastolic	Systolic	Diastolic
Day 1								
Day 2								
Day 3								
Day 4								
Day 5								
Day 6								
Day 7								
Ave								
<u>Average overall BP</u>								

To calculate the average, add up the total column and divide by the number of days. So for example, In Col A, add all the values from **Day 2** up to day 7 and then divide by 6. Then do the same for the other columns. To calculate an average overall BP, just add together the 4 average systolic readings and divide by 4 and then add the 4 Average diastolic readings & divide by 4.

*If you are **diabetic, >80 years old and/or have symptoms of postural hypotension (light headedness/dizziness on standing)** please can you take a sitting BP reading then stand for at least one minute and take another blood pressure reading whilst standing.*

Sitting BP (after 1 min)

Systolic:		Diastolic:	
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Standing BP (after 1 min)

Systolic:		Diastolic:	
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