

Torphins Medical Practice

Blood Pressure Home Monitoring

Please read the instructions overleaf before using the BP Machine

Patient's Name _____ DoB _____

Date	AM Readings	PM Readings	Average Readings (GP Use Only)
	1	1	
	2	2	
	3	3	
	1	1	
	2	2	
	3	3	
	1	1	
	2	2	
	3	3	
	1	1	
	2	2	
	3	3	
	1	1	
	2	2	
	3	3	
	1	1	
	2	2	
	3	3	
		Total Average Reading (GP Use Only)	

Please record your blood pressure readings morning and evening for seven consecutive days.

- Wear short sleeved/loose clothing
- Sit with arm supported on a table or desk and the cuff at heart level
- Ensure arm is relaxed, not tense
- Avoid talking during the measurement
- Record readings