



# Symphony Healthcare Services Home Blood Pressure Analysis

**Instructions**  
 Measure your blood pressure in a relaxed setting, seated with your arm outstretched and supported on a pillow.  
 Record blood pressure in the morning and the evening for a week.  
 On each occasion measure your blood pressure twice with at least a minute in between.  
 Please record the measurements in the spaces below.

**Name:**

**D.O.B:**

**Start date:**

	Morning BP				Evening BP			
	Reading 1		Reading 2		Reading 1		Reading 2	
Day 1	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>
Day 2	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>
Day 3	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>
Day 4	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>
Day 5	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>
Day 6	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>
Day 7	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>	<input type="text"/>	/ <input type="text"/>

**FOR STAFF USE**

Average including day 1  /

Average minus day 1  /

Please fill in your results and return to your GP practice through Ask My GP, by email or by post