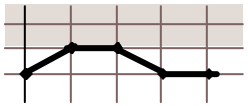
Weekly Blood Pressure Log

Name_____

Date: _____ to _____

Place a small dot at the appropriate intersection for the high number (systolic) and the time your blood pressure was taken. Then do the same for the low number (diastolic) in the lower chart.

At the end of the week, connect the dots to see your blood pressure trend.



Be sure to carefully track the items below to see how various factors influence your blood pressure.

Bring this form to your health care provider to discuss trends in your blood pressure.

	Monday			Tuesday			Wednesday			Thursday			Friday			Saturday			Sunday			
Systolic — Top Number																						
180																						Stage 2 Hypertension
170																						
160																						
150																						Stage 1 Hypertension
140																						
130																						Pre-hypertensive
120																						
110																						Normal
Diastolic — Bottom Number																						
100																						Stage 2 Hypertension
120																						
110																						
100																						Stage 1 Hypertension
90																						Pre-hypertensive
80																						Norma
70																						
60																						
50																						
	AM	PM	Eve	AM	PM	Eve	AM	PM	Eve	AM	PM	Eve	AM	PM	Eve	AM	PM	Eve	AM	PM	Eve	
What did you eat for breakfast?																						
What did you eat for lunch?																						
What did you eat for dinner?																						
How often did you add salt to your food?																						
How many alcoholic drinks did you have today?																						
What medications did you take today? How much?																						