

Name: _____

Date of Birth: _____

My Blood Pressure Diary

DATE	TIME	BLOOD PRESSURE (mmHg)	PULSE (beats/min)	REMARKS
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Instructions: - Measure your blood pressure at the same time of the day. To measure, sit straight. Your feet should be flat on the floor and arm well supported on the table. Ensure the blood pressure cuff is at the same height as your heart.