## **Blood pressure self-measurement reading**

## Your personal information:

- Last name and first name:
- Date of Birth:
- Current treatments:

## **Rules for taking voltage measurements:**

- Three consecutive measurements (a few minutes apart in the morning before breakfast),
- Three consecutive measurements (a few minutes apart in the morning between dinner and bedtime),
- Three days in a row,
- Enter all the numbers that appear on the screen.

	Morning			Evening		
	Systolic	Diastolic	Pulse	Systolic	Diastolic	Pulse
Measure 1						
Measure 2						
Measure 3						
2nd day:						
, , , , , , , , , , , , , , , , , , ,	Morning			Evening		
	Systolic	Diastolic	Pulse	Systolic	Diastolic	Pulse
Measure 1						
Measure 2						
Measure 3						
3rd day:		l l				
	Morning			Evening		
	Systolic	Diastolic	Pulse	Systolic	Diastolic	Pulse
Measure 1						
Measure 2						
Measure 3						
Systolic average (1)		Diastolic average (1)		Auto blood pressure monitor		
				Brand :	Model :	Wrist / arm

**Necessary**: show this document to the pharmacist when you come to the pharmacy and the doctor at the next consultation.

- (1) Add all the measurements and divide by 18,
- (2) Delete unnecessary measurements.