

## Tracking your blood pressure

*Tracking* means regularly checking your blood pressure—and writing down your numbers—over a period of time. (For example, once or twice a day over one month, or as your doctor advises.)

Tracking your blood pressure can show how you are doing between doctor visits. Comparing your numbers over time is important. It can show how well lifestyle changes or your medicines are working to help lower blood pressure.

### How to use this tracker

You have downloaded and saved the blood pressure tracker file on your computer. You now have 2 choices:

- **Track on paper.** Print out a copy of the tracker and write in your information
- OR**
- **Track on your computer.** Type information right into your tracker file, save it, and print it out later. Since this is your private health information, make sure you use a personal computer with security measures in place

1. Set up and follow a schedule for checking your blood pressure at home.
2. Fill in your tracker with the current month and your blood pressure goal.
3. Each time you check your blood pressure, write down the date, time of day, and your blood pressure numbers in the tracker.
4. Print out and share your completed tracker with your doctor at your next office visit.

### My blood pressure tracker

**My blood pressure goal**

**Month:**

**My goal:**

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**Week 1**

Date:	Sun	Mon	Tue
Time of Day:	11:30 AM		
BP Reading:	150 / 90	/	/
Time of Day:			
BP Reading:	/	/	/

### Remember:

- Try to take your blood pressure at the same time every day
- Follow the instructions for accurate readings that came with your monitor

# My blood pressure tracker

## My blood pressure goal

Month:

My goal:

**Close in on your goal.** Ask your doctor about what your blood pressure goal should be—and what you can do to reach it. Having other medical conditions such as diabetes or kidney problems may affect the blood pressure goal your doctor gives you.

Week 1							
Date:	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Time of Day:							
BP Reading:	/	/	/	/	/	/	/
Time of Day:							
BP Reading:	/	/	/	/	/	/	/

Week 2							
Date:	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Time of Day:							
BP Reading:	/	/	/	/	/	/	/
Time of Day:							
BP Reading:	/	/	/	/	/	/	/

Week 3							
Date:	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Time of Day:							
BP Reading:	/	/	/	/	/	/	/
Time of Day:							
BP Reading:	/	/	/	/	/	/	/

Week 4							
Date:	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Time of Day:							
BP Reading:	/	/	/	/	/	/	/
Time of Day:							
BP Reading:	/	/	/	/	/	/	/



