



# Wellness Letter<sup>®</sup>

In Collaboration With The UC Berkeley School of Public Health

# Understanding Your Blood Pressure: How to Make Sense of the Number



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and the Editors of the *Wellness Letter*

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# *Introduction*



## **Why This Number Deserves a Second Look**

When your blood pressure is taken at the doctor's office, the result is often delivered quickly—a number, perhaps a brief comment, and then the appointment moves on. Yet that single number provides important information about your heart and blood vessel health, and understanding what it means can help you make informed decisions about your care. This guide will help you interpret what your reading means—and what it doesn't—so you can participate more confidently in conversations with your healthcare provider.

So what does that number actually tell you, and how has our understanding of it evolved?

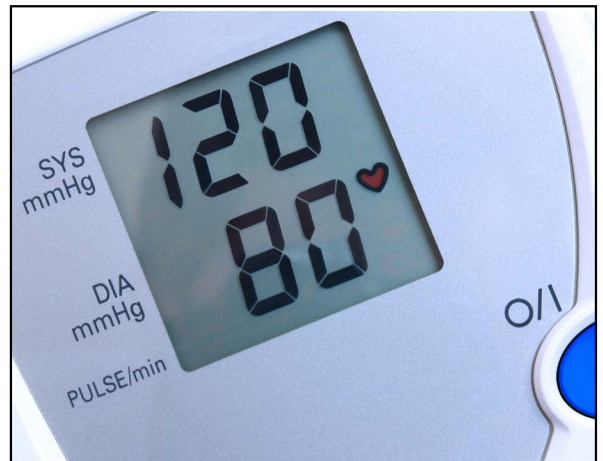
# What Your Numbers Mean

**B**lood pressure is measured in millimeters of mercury (mm Hg) and recorded as two numbers—for example, 120/80 mm Hg.

The first number (systolic) reflects the pressure in your arteries when your heart beats.

The second number (diastolic) reflects the pressure in your arteries when your heart rests between beats.

**Both numbers matter.** High blood pressure is diagnosed when either number consistently exceeds the normal range—less than 120 for systolic and less than 80 for diastolic—which is why a reading of 128/85 would be considered stage 1 hypertension even though the systolic number is below 130.



*Blood pressure is also measured in categories—normal (less than 120/80), elevated (120–129 and less than 80), stage 1 hypertension (130–139 or 80–89), stage 2 hypertension (140/90 or higher), and hypertensive crisis (higher than 180/120). These categories help identify your cardiovascular health status and guide treatment decisions.*

*Based on 2025 AHA/ACC Guidelines for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults*

*Note: These categories are based on office/clinical measurements. Home blood pressure readings are typically 5–10 mm Hg lower than office readings. Your healthcare provider can help you interpret your home readings in context.*

# What Has Changed

**W**hat has changed over time is not the categories themselves, but how they're interpreted. **Here's what that means for you:**

- **Doctors now focus on context.** Your blood pressure is evaluated alongside your individual risk factors, patterns over time, and how the measurement was taken. No single reading tells the whole story.
- **Proper measurement technique matters more than we once realized.** Even small errors in positioning, cuff placement, or timing can change your reading by several points.
- **Home monitoring has become a valuable tool,** though it requires attention to device accuracy, proper cuff fit, and consistent measurement technique.
- **Your overall health picture matters.** Doctors now look at your blood pressure alongside other factors—such as age, cholesterol, diabetes, and family history—to personalize your treatment.
- **Diagnosis requires consistency.** High blood pressure is diagnosed based on consistent readings taken properly over time—not a single isolated number.
- **But certain readings still warrant immediate action.** Readings accompanied by symptoms such as chest pain, shortness of breath, severe headache, vision changes, or difficulty speaking require prompt medical attention.



So when you hear a number in the exam room, the real question is not simply “Is this high or low?” It’s: What does this number mean for me? Was it taken correctly? Is it consistent with prior readings? And how does it fit into my overall cardiovascular picture?

**Patterns matter. But certain numbers warrant immediate follow-up.**

# Printable Measurement Checklist ✓

**A**ccurate measurement is the foundation of good interpretation. Even small variations in positioning, timing, or cuff fit can change a reading by several points.

The checklist below reflects commonly recommended measurement practices. Using a consistent approach each time you check your blood pressure—at home or in a clinical setting—can help ensure that the numbers you record are as reliable as possible.



## Measurement Checklist

- Sit quietly for at least five minutes before measurement. Even small amounts of movement or conversation can affect the reading.
- Keep your back supported and both feet flat on the floor.
- Rest your arm on a flat surface at heart level.
- Place the cuff on bare skin and ensure it fits properly.
- Avoid caffeine, exercise, or smoking for 30 minutes beforehand.
- Do not talk during the reading.
- Take two readings, one minute apart, and average them. If readings differ by more than 5 mm Hg (for either the top or bottom number), take 1–2 additional readings and average all of them.

# 14-Day Blood Pressure Tracking Log

Tracking readings over time can reveal patterns that a single number cannot. Use this log to record morning and evening readings for 14 days. If you're unsure whether your home monitor is accurate or properly sized, ask your healthcare provider.

### How to use this log:

- Measure your blood pressure at approximately the same times each day (choose times that work for your schedule)
- Follow the measurement checklist from Section 2 each time
- Take two readings, one minute apart, and record both
- Calculate and record the average
- Use the Notes column to capture context (stress, poor sleep, exercise, medication changes, etc.)

## YOUR 14-DAY BLOOD PRESSURE TRACKING LOG

Start Date:

Day	Time	Reading 1	Reading 2	Average	Notes
1	AM	142/88	136/84	139/86	Stressed about meeting
1	PM	134/82	132/80	133/81	Relaxed after work
2	AM	138/85	135/82	137/84	Slept poorly last night
2	PM	130/80	128/78	129/79	Felt good today

*Sample data shown for Days 1-2. Your complete log should include all 14 days (28 total entries).*

### What to look for in your results:

After 14 days, review your log for patterns:

- **Trends:** Are your numbers generally improving, worsening, or staying stable?
- **Time patterns:** Is your blood pressure consistently higher at certain times of day?
- **Context clues:** Do your notes reveal connections between your readings and stress, sleep, activity, or medication?

**Bring this log to your next appointment** to discuss your patterns with your healthcare provider. These trends provide valuable information for personalized treatment decisions.

*A blank, printable version of this log is provided on the next page.*

# YOUR 14-DAY BLOOD PRESSURE TRACKING LOG

Start Date:

Day	Time	Reading 1	Reading 2	Average	Notes
1	AM				
1	PM				
2	AM				
2	PM				
3	AM				
3	PM				
4	AM				
4	PM				
5	AM				
5	PM				
6	AM				
6	PM				
7	AM				
7	PM				
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8	PM				
9	AM				
9	PM				
10	AM				
10	PM				
11	AM				
11	PM				
12	AM				
12	PM				
13	AM				
13	PM				
14	AM				
14	PM				

*After 14 days, look for trends, time-of-day patterns, and connections between readings and your notes. Bring this completed log to your healthcare provider to discuss your patterns and treatment.*

# Patterns Matter More Than a Single Reading

**B**lood pressure naturally fluctuates throughout the day and can vary meaningfully based on activity, stress, time of day, and even recent conversation. This is why a single reading provides limited information, while consistent patterns over time reveal the true picture of your cardiovascular health.



## Why readings vary:

Your first reading is often higher than subsequent ones—a phenomenon called the “white coat effect” in medical settings, or simply because your body hasn’t fully settled into rest yet. If your two readings differ by more than 5 mm Hg (for either systolic or diastolic), this suggests you may need more time to rest before measuring, or that additional readings are needed for an accurate average. Taking multiple readings and averaging them provides a more reliable estimate.

## Questions to guide your review:

As you review your numbers over time (refer to your 14-day tracking log in Section 3), consider:

- **Consistency:** Are numbers consistently elevated (suggesting chronic hypertension) or only occasionally elevated (suggesting situational factors)?
- **Setting differences:** Do readings differ between home and office settings? Consistently higher readings at the doctor’s office may indicate white coat hypertension.
- **Lifestyle factors:** Are stress, poor sleep, or physical activity influencing spikes? Your Notes column can help identify these connections.
- **Time of day:** Are readings consistently higher in the morning versus evening, or vice versa?

**These patterns provide valuable context for your healthcare provider** to personalize your treatment approach. What looks like “borderline” numbers in isolation may reveal a clear trend—either reassuring or concerning—when viewed over two weeks.

# When to Seek Immediate Medical Care

**L**ost blood pressure management involves monitoring readings over time and working with your healthcare provider. However, certain situations require prompt medical attention.

**Seek emergency care immediately (call 911 or go to the emergency room) if you have:**

**Blood pressure above 180/120 mm Hg combined with any of the following symptoms:**

- Severe chest pain
- Severe headache
- Shortness of breath or difficulty breathing
- Vision changes or vision loss
- Difficulty speaking or slurred speech
- Numbness or weakness (especially on one side of the body)
- Severe back pain
- Confusion or difficulty staying alert

These symptoms may signal a hypertensive emergency, which requires immediate evaluation and treatment.

**Contact your healthcare provider the same day if:**

- Your blood pressure is above 180/120 mm Hg but you have no symptoms
- Your readings are consistently higher than your usual range
- You develop new or concerning symptoms, even if blood pressure is not severely elevated
- You are unsure how to interpret a reading

**When in doubt, seek medical guidance.** Acting promptly can prevent serious complications. It is always appropriate to call your healthcare provider or seek emergency care if you are concerned about your blood pressure or symptoms.



# Questions to Ask Your Healthcare Provider

**B**ringing your blood pressure readings and tracking log to your appointments helps your healthcare provider see patterns and make informed decisions. These questions can help guide productive conversations:



## About Your Readings:

- Was my blood pressure measured according to current guidelines?
- How do today's readings compare to my previous measurements?
- What pattern do you see in my tracking log?

## About Home Monitoring:

- Should I monitor my blood pressure at home?
- How often should I measure, and at what times of day?
- What should I do if I get a concerning reading at home?

## About Your Overall Health:

- How does my overall health affect my blood pressure treatment approach?
- What lifestyle changes would have the greatest impact for me specifically?
- Are there any medications or supplements I take that might affect my blood pressure?
- Should I be taking my blood pressure medication at a different time of day?

## About Next Steps:

- When should we reassess my blood pressure?
- What are our treatment goals?
- What symptoms or changes should prompt me to contact you sooner?

An elderly couple is walking through a lush green field with tall grass and small orange flowers. The woman is on the left, wearing a pinkish-red button-down shirt and light-colored pants. The man is on the right, wearing a light blue and white plaid shirt and blue jeans. They are both smiling and looking towards each other. The background is a line of trees under a bright sky.

# *Conclusion*

## **A Final Perspective**

Blood pressure management is not a one-time event—it's an ongoing conversation between you and your healthcare provider, informed by consistent measurement, careful tracking, and thoughtful interpretation.

This guide has equipped you with the tools to take accurate readings, track patterns over time, and ask informed questions. Use your tracking log, follow the measurement checklist, and bring your observations to your appointments. These simple practices can transform scattered numbers into meaningful insights about your cardiovascular health.

As evidence evolves and new research emerges, staying informed helps you remain an active participant in your care. Your understanding matters—both for the decisions you make and the conversations you have with your healthcare team.

## Understanding Your Blood Pressure

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The information contained in **Understanding Your Blood Pressure** is not intended as a substitute for the advice of a physician. Readers who suspect they may have specific medical problems should consult a physician about any suggestions made.

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