

A Lexington Medical Center Physician Practice

565 Columbia Avenue, Suite 200, Chapin, SC 29036

Phone: (803) 314-9100 • Fax: (803) 314-9101

LFPChapin.com

Lexington Medical Center

Blood Pressure Log

My blood pressure goal is:_

Date	Time	Systolic (Top Number)	Dystolic (Bottom Number)	Comments
	□ a.m. □ p.m.			
	□ a.m. □ p.m.			
	□ a.m. □ p.m.			
	□ a.m. □ p.m.			
	□ a.m. □ p.m.			
	□ a.m. □ p.m.			
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	□ a.m. □ p.m.			
	□ a.m. □ p.m.			