Senior Blood Pressure Chart

PATIENT INFORMATION

Full Name: _____ Date of Birth: _____ dd / mm / yyyy

Gender: _____ Patient ID: _____

Contact Number: _____ Email Address: _____

RECOMMENDED BLOOD PRESSURE PARAMETERS FOR FEMALES 60-80 YEARS OLD:

Age: 60-65 | Systolic (mmHg): 130 +/- 15 | Diastolic (mmHg): 80 +/- 10

Age: 66-70 | Systolic (mmHg): 135 +/- 15 | Diastolic (mmHg): 85 +/- 10

Age: 71-75 | Systolic (mmHg): 140 +/- 15 | Diastolic (mmHg): 90 +/- 10

Age: 76-80 | Systolic (mmHg): 145 +/- 15 | Diastolic (mmHg): 95 +/- 10

RECOMMENDED BLOOD PRESSURE PARAMETERS FOR MALES 60-80 YEARS OLD:

Age: 60-64 | Systolic (mmHg): 110

PATIENTS RECORDS:

Date/Time: _____ Systolic: _____

Diastolic: _____ Interpretation: _____

PHYSICIAN'S NOTES AND RECOMMENDATIONS

Physician's Notes and Recommendations

Physician's Signature:

Date: _____ dd / mm / yyyy