

Checking your own blood pressure during pregnancy

Introduction

If you have chronic hypertension, gestational hypertension (raised blood pressure during pregnancy only) or pre-eclampsia you will need your blood pressure checked more regularly. Similarly, if you have normal blood pressure but have chronic kidney disease, autoimmune disease or have had high blood pressure in a previous pregnancy, you may need frequent blood pressure checks. To do this, we are introducing blood pressure self-monitoring for those of you who would benefit, as agreed by your consultant.

The information in this leaflet will help guide you through how to check your own blood pressure.

How to take your blood pressure using an upper arm monitor

Your doctor or midwife will tell you when and how often they would like you to check your own blood pressure.

Preparing to take your blood pressure:

- Always measure your blood pressure using the same arm (normally the left).
- Wear loose clothing with sleeves that roll up easily. The sleeves should not feel tight when rolled up. You will need to fit the cuff onto your bare arm – alternatively you could take your arm out of the clothing.
- Sit on a chair, with your back supported and both feet flat on the floor.
- Rest for 5 minutes before beginning to take blood pressure readings.

Reference No.

GHPI1578_06_23

Department

Maternity

Review due

June 2026

Patient Information

Fitting the blood pressure cuff:

- Slip the cuff onto your arm so that the air tube points towards your wrist. The yellow line on the cuff should be about 2cm above the inside of the elbow joint.
- Tighten the cuff around your arm and secure using the Velcro® fastening.
- Rest your arm on a table or across your lap with your hand slightly open and the palm facing upward.
- Check that the tubing from the cuff is attached to the blood pressure machine.
- Make sure that the blood pressure monitor is on a flat surface.

Taking and recording your blood pressure:

Once you have the cuff in the correct position, you are ready to start:

- Press the start button on the front of the machine to take a reading. Relax, do not move your arm muscles and do not talk until the measurement is completed.
- Each time you measure your blood pressure you will get two readings:
 - The top number, usually called SYS (systolic).
 - The bottom number of your blood pressure, usually called DIA (diastolic).
 - Your pulse may also be displayed, usually called PUL – you do not need to record this.
- Measure your blood pressure twice, at least one minute apart.
- Write down the second blood pressure reading and the date and time it was taken in your orange maternity notes (from page 18 onwards).

Patient
 Information

Your blood pressure reading

The table below is adapted from the Royal College of Obstetrics and Gynaecology blood pressure guidance and informs you what your reading means and what action you should take.

Level	Blood Pressure /mmHG	Action
High	Systolic 150 or more OR Diastolic 100 or more	Your blood pressure is high. Sit quietly for 5 minutes then measure it again and note the reading. If your repeated reading is still high, please contact your maternity unit for review today (within 4 hours).
Raised	Systolic 140-149 OR Diastolic 90-99	Your blood pressure is raised. Sit quietly for 5 minutes then measure it again and note the reading. If your repeated reading is raised, please contact your maternity unit within 24 hours and continue to monitor your blood pressure daily.
High Normal	Systolic 135-139 OR Diastolic 85-89	Your blood pressure is normal but moving towards the raised threshold. Sit quietly for 5 minutes then measure it again and note the reading. If your repeat reading is still high end of normal, please monitor your blood pressure daily.
Normal	Systolic 110-134 AND Diastolic 80-84	Your blood pressure is normal. Continue blood pressure monitoring and your current care.
Low	Systolic 109 or less AND Diastolic 69 or less	If you are not taking blood pressure medication: Your blood pressure is normal. If you are feeling well this blood pressure does not need any further action. If you are taking blood pressure medication: Your blood pressure is low. Repeat once more in 5 minutes. If your repeat reading is still low, contact your maternity unit within 24 hours or within 4 hours if you feel unwell (e.g. dizzy or faint).

**Patient
Information**

Loan agreement

You will be asked to sign a loan agreement before taking the blood pressure monitor home. Your midwife will discuss this in more detail with you.

Contact information

If you require further help or have any concerns about checking your blood pressure, please contact:

Maternity Assessment

Gloucestershire Royal Hospital

Tel: 0300 422 6104

Monday to Friday, 8:30am to 4:00pm

If you need support outside of these times, please contact:

Maternity Triage

Gloucestershire Royal Hospital

Tel: 0300 422 5541

Content reviewed: June 2023

Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85