90-DAY LOG · PRINTABLE

Blood Pressure Log

+ 30-Day Heart Habit Tracker



90-day reading log

Monthly averages

Doctor visit prep

30-day habit tracker

By Coach Luke | NASM-CPT, NESTA Nutrition Coach

Real advice. No gimmicks.

START HERE

How to Use This Log

This log gives you one calm place for your home readings, your averages and your questions, plus a 30-day habit tracker that runs alongside. Here is the routine.

1. **Fill in My Health Info first.** Write down your doctor, your pharmacy, the target your doctor gave you and your medications, exactly as they were prescribed.
2. **Log 2 readings, morning and evening.** Each day has a morning row and an evening row. Take 2 readings a minute apart and write both down, plus your pulse, the arm you used and a short note.
3. **Work out your monthly averages.** At the end of each week, add up your readings and divide. Copy the week into Monthly Averages so you can see your real pattern.
4. **Prep for your appointment.** Before each visit, fill in a Doctor Visit Prep page and bring it with this log. It turns a rushed visit into a useful conversation.
5. **Run the 30-Day Heart Habit Tracker alongside.** Tick off a few small daily habits that support healthy blood pressure, try one new idea a day and check in once a week.

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Printing tips

Print at 100% or “Actual size” so the boxes stay a comfortable size for writing. Print the reading log pages again any time you need more.

My start date:

> *One reading is a snapshot. A week of careful readings is the real picture, and that picture is what helps your doctor help you.*
>
> **Coach Luke**

This log is a tracking tool for general education. It is not medical advice, a diagnosis or a treatment plan, and it is not a substitute for care from your doctor. Never start, stop or change any medication without your doctor. Talk to your doctor before changing your diet or activity, especially if you have heart or kidney disease or diabetes, are pregnant, or take medicines that affect potassium.

BEFORE YOU LOG

How to Take an Accurate Home Reading

Small things like a crossed leg or a full bladder can push a reading up. Use the same routine every time so your numbers can be compared fairly.

1. **Skip caffeine, exercise and smoking** for 30 minutes before you measure.
2. **Empty your bladder.** A full bladder can push the number up.
3. **Sit in a chair with back support,** both feet flat on the floor and legs uncrossed.
4. **Rest your arm on a table** so the middle of the cuff sits level with your heart.
5. **Put the cuff on bare skin,** about an inch above the bend of your elbow. Snug, not tight.
6. **Sit quietly for 5 minutes.** No phone, no TV, no talking.
7. **Press start and stay still and silent** while the cuff inflates and lets go.
8. **Wait 1 minute and take a second reading** the same way.
9. **Write down both readings** with the date, time, pulse and which arm you used.

Use a validated upper-arm cuff. Ask your pharmacist to help you check that your monitor is validated.

Check your cuff size. Measure around the middle of your upper arm and compare it with the range on the cuff. Too small can read high; too large can read low.

Measure both arms the first time. Then use the arm with the higher reading every time, and mention a big difference to your doctor.

Same times every day. Morning before breakfast, coffee and medication (unless your doctor says otherwise) and evening before dinner or bed.

Keep every number. If the two readings are far apart, take a third and log all of them, even the one you don't like.

RED FLAG

Call 911: 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking.
180/120 or higher with no symptoms? Sit quietly for a minute or two and check again. If it stays that high, call your doctor right away.

Never stop or change your blood pressure medication because of a home reading. Bring this log to your doctor or pharmacist and decide together.

KNOW YOUR NUMBERS

Understanding Your Numbers

A reading is written as top number over bottom number, such as 118/76, measured in mmHg. These are the blood pressure categories for adults from the 2025 American Heart Association and American College of Cardiology guideline.

Category	Top number		Bottom number	What it means for your log
Normal	Under 120	AND	Under 80	Keep up your habits and keep checking.
Elevated	120–129	AND	Under 80	An early heads-up. A good time to build habits.
High blood pressure: Stage 1	130–139	OR	80–89	Talk with your doctor about your average.
High blood pressure: Stage 2	140 or higher	OR	90 or higher	Talk with your doctor about your average.
Severe	Higher than 180	AND/OR	Higher than 120	Recheck after 1–2 minutes. Still high? Call your doctor right away. Symptoms? Call 911.

Top number (systolic): the pressure in your arteries while your heart beats.

Bottom number (diastolic): the pressure while your heart rests between beats.

The higher category wins. If either number falls in a higher row, that's your category. 136/78 is Stage 1, and so is 124/84.

One reading is a snapshot. Doctors look at the average of many readings on different days, not one number.

Pulse is not blood pressure. It's your heart rate in beats per minute. Tell your doctor if it's often very fast, very slow or irregular.

My numbers

The target my doctor gave me:

My category from my last 7-day average:

For most adults, normal is under 120/80. Your doctor may set a different personal target for you.

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

KEEP IT HANDY

My Health Info

Fill this in yourself, in your own words, exactly as your doctor and pharmacist told you.

MY NAME

DATE STARTED

MY DOCTOR

DOCTOR PHONE

MY PHARMACY

PHARMACY PHONE

MY MONITOR (BRAND / MODEL)

CUFF SIZE AND ARM I USE (L / R)

THE TARGET MY DOCTOR GAVE ME

DATE

My medications and times

MEDICATION	DOSE	WHEN I TAKE IT	NOTES

OTHER HEALTH NOTES

EMERGENCY CONTACT AND PHONE

Take your medications exactly as prescribed. Never start, stop or change a medication without your doctor.

90-DAY READING LOG

Days 1 to 7

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 1 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 2 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 3 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 4 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 5 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 6 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 7 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 8 to 14

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 8 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 9 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 10 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 11 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 12 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 13 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 14 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 15 to 21

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 15 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 16 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 17 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 18 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 19 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 20 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 21 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 22 to 28

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 22 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 23 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 24 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 25 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 26 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 27 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 28 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 29 to 35

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 29 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 30 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 31 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 32 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 33 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 34 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 35 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 36 to 42

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 36 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 37 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 38 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 39 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 40 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 41 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 42 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 43 to 49

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 43 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 44 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 45 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 46 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 47 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 48 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 49 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 50 to 56

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 50 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 51 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 52 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 53 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 54 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 55 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 56 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 57 to 63

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 57 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 58 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 59 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 60 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 61 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 62 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 63 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 64 to 70

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 64 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 65 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 66 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 67 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 68 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 69 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 70 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 71 to 77

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 71 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 72 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 73 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 74 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 75 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 76 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 77 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 78 to 84

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 78 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 79 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 80 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 81 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 82 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 83 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 84 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

Days 85 to 90

DAY		TIME	READING 1 TOP / BOTTOM	READING 2 TOP / BOTTOM	PULSE	ARM	NOTES sleep, stress, meds, salty meal
Day 85 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 86 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 87 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 88 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 89 Date	AM		/	/		L R	
	PM		/	/		L R	
Day 90 Date	AM		/	/		L R	
	PM		/	/		L R	

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

MONTHLY AVERAGES

Month 1: Days 1 to 30

Averages show your real pattern far better than any single reading. Fill in one row at the end of each week.

WEEK	MORNING AVERAGE	EVENING AVERAGE	HIGHEST READING	LOWEST READING	AVERAGE PULSE
Days 1–7	/	/	/	/	
Days 8–14	/	/	/	/	
Days 15–21	/	/	/	/	
Days 22–28	/	/	/	/	
Days 29–30	/	/	/	/	
Month average	/	/	/	/	

How to average your readings

Add up all the top numbers for the week and divide by how many readings you took. Do the same for the bottom numbers. Example: 128 + 124 + 130 + 126 = 508, and 508 ÷ 4 = 127. Ask your doctor if they want you to leave out any readings, such as the first day of a 7-day stretch.

Patterns I noticed

Questions for my doctor

DAYS WITH READINGS LOGGED

_____ / 30

READINGS AT OR ABOVE MY TARGET

_____

READINGS 180/120 OR HIGHER

_____

MONTHLY AVERAGES

Month 2: Days 31 to 60

Averages show your real pattern far better than any single reading. Fill in one row at the end of each week.

WEEK	MORNING AVERAGE	EVENING AVERAGE	HIGHEST READING	LOWEST READING	AVERAGE PULSE
Days 31–37	/	/	/	/	
Days 38–44	/	/	/	/	
Days 45–51	/	/	/	/	
Days 52–58	/	/	/	/	
Days 59–60	/	/	/	/	
Month average	/	/	/	/	

How to average your readings

Add up all the top numbers for the week and divide by how many readings you took. Do the same for the bottom numbers. Example: 128 + 124 + 130 + 126 = 508, and 508 ÷ 4 = 127. Ask your doctor if they want you to leave out any readings, such as the first day of a 7-day stretch.

Patterns I noticed

Questions for my doctor

DAYS WITH READINGS LOGGED

_____ / 30

READINGS AT OR ABOVE MY TARGET

_____

READINGS 180/120 OR HIGHER

_____

MONTHLY AVERAGES

Month 3: Days 61 to 90

Averages show your real pattern far better than any single reading. Fill in one row at the end of each week.

WEEK	MORNING AVERAGE	EVENING AVERAGE	HIGHEST READING	LOWEST READING	AVERAGE PULSE
Days 61–67	/	/	/	/	
Days 68–74	/	/	/	/	
Days 75–81	/	/	/	/	
Days 82–88	/	/	/	/	
Days 89–90	/	/	/	/	
Month average	/	/	/	/	

How to average your readings

Add up all the top numbers for the week and divide by how many readings you took. Do the same for the bottom numbers. Example: 128 + 124 + 130 + 126 = 508, and 508 ÷ 4 = 127. Ask your doctor if they want you to leave out any readings, such as the first day of a 7-day stretch.

Patterns I noticed

Questions for my doctor

DAYS WITH READINGS LOGGED

_____ / 30

READINGS AT OR ABOVE MY TARGET

_____

READINGS 180/120 OR HIGHER

_____

DOCTOR VISIT PREP · COPY 1

Doctor Visit Prep

Fill this in the day before your visit and bring it with your log. Hand it to your doctor or pharmacist.

VISIT DATE _____ DOCTOR / CLINIC _____ LAST VISIT DATE _____

My readings since my last visit

	TOP / BOTTOM	PULSE	NOTES
Morning average	/		
Evening average	/		
Highest reading + date	/		
Lowest reading + date	/		

Changes since my last visit

Medications (as prescribed)	
Missed doses or side effects	
Food, salt, alcohol	
Activity and sleep	
Stress or symptoms	

My questions

Is my average where you want it to be?

What target should I aim for, and how often should I check?

Do any of my medicines or supplements affect my readings?

What my doctor said

MY NEXT VISIT

DOCTOR VISIT PREP · COPY 2

Doctor Visit Prep

Fill this in the day before your visit and bring it with your log. Hand it to your doctor or pharmacist.

VISIT DATE _____ DOCTOR / CLINIC _____ LAST VISIT DATE _____

My readings since my last visit

	TOP / BOTTOM	PULSE	NOTES
Morning average	/		
Evening average	/		
Highest reading + date	/		
Lowest reading + date	/		

Changes since my last visit

Medications (as prescribed)	
Missed doses or side effects	
Food, salt, alcohol	
Activity and sleep	
Stress or symptoms	

My questions

Is my average where you want it to be?

What target should I aim for, and how often should I check?

Do any of my medicines or supplements affect my readings?

What my doctor said

MY NEXT VISIT

30-DAY HEART HABIT TRACKER

Small Daily Habits, Tracked

Blood pressure responds to everyday habits: how much you move, what you eat, how you sleep and how you handle stress. This tracker keeps 7 of them in front of you for 30 days. Aim for more ticks than last week, not a perfect page.

Walk. Write your walking minutes. Moving most days is the goal, at a pace your doctor says is fine for you.

Salt swap. Tick it when you made one lower-sodium choice today.

Potassium food. Tick it when you ate a potassium-rich food such as beans, potatoes, yogurt, leafy greens, avocado, tomatoes or fruit.

Water. Write how many glasses you drank.

Sleep. Write last night's hours. Most adults do best with 7 to 9.

5-min calm. Tick it when you took a 5-minute stress break: slow breathing, a quiet sit or a short stroll.

Today's idea. Tick it when you tried the day's habit idea from pages 27 and 28.

How to use it

Fill in one row each evening on pages 25 and 26. Each day also has a short habit idea on pages 27 and 28: try it, then tick it. Every 7 days, do a Weekly Check-In (pages 29 to 32), and finish with the 30-Day Reflection on page 33.

Why these habits matter to me

Check with your doctor before starting a new activity plan. If you have kidney disease or take medicines that affect potassium, ask your doctor before adding potassium-rich foods.

Days 1 to 15

Day	Walk minutes	Salt swap ✓	Potassium food ✓	Water glasses	Sleep hours	5-min calm ✓	Today's idea ✓
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

Days 16 to 30

Day	Walk minutes	Salt swap ✓	Potassium food ✓	Water glasses	Sleep hours	5-min calm ✓	Today's idea ✓
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							

Habit Ideas: Days 1 to 15

One small idea a day. Try it, tick the box here and in your tracker.

Day 1	Park your blood pressure cuff next to your coffee maker or toothbrush so checking becomes automatic.	☐
Day 2	Taste your food before you reach for the salt. Season only if it still needs it.	☐
Day 3	Add a baked potato or sweet potato, skin on, as a side at lunch or dinner.	☐
Day 4	Take one phone call today on your feet, or walking around the house.	☐
Day 5	Have a glass of low-fat milk or plain kefir with breakfast or as a snack.	☐
Day 6	Leave your phone in another room for the first 30 minutes after you wake up.	☐
Day 7	Put one “no salt added” version in your cart: canned tomatoes, beans or broth.	☐
Day 8	Write tomorrow's walk into your calendar like an appointment.	☐
Day 9	Make a quick fresh salsa with tomato, onion, lime and cilantro for eggs, fish or chicken.	☐
Day 10	Keep your bedroom cool, dark and quiet tonight.	☐
Day 11	Fill a water bottle in the morning and keep it where you can see it.	☐
Day 12	Look at the menu before you eat out and choose your meal ahead of time.	☐
Day 13	Add half an avocado to a meal today.	☐
Day 14	Stand up and sit down slowly from a sturdy chair 10 times, using the armrests if you need to.	☐
Day 15	Set a timer to stand up and stretch once every hour you sit.	☐

Habit Ideas: Days 16 to 30



One small idea a day. Try it, tick the box here and in your tracker.

Day 16	Before bed, jot down three lines about your day to clear your head.	☐
Day 17	Cook a batch of plain brown rice, quinoa or barley to use all week.	☐
Day 18	Try one vegetable you haven't eaten in a while.	☐
Day 19	Call or text a friend you've been meaning to catch up with.	☐
Day 20	Ask your pharmacist whether any cold, allergy or pain medicine you use can raise blood pressure.	☐
Day 21	Get 10 minutes of daylight outside this morning.	☐
Day 22	Turn on two favorite songs and move while dinner cooks.	☐
Day 23	Wash and cut vegetables for snacks and store them at eye level in the fridge.	☐
Day 24	Drink a glass of water with each meal today.	☐
Day 25	If you smoke or vape, ask your doctor or pharmacist about support to quit.	☐
Day 26	Try a 5-minute body scan: relax your jaw, shoulders, hands and belly, one at a time.	☐
Day 27	Plan a weekend walk with a friend or family member.	☐
Day 28	Cook one meal from scratch that you would normally buy ready-made.	☐
Day 29	Grow a small pot of basil, parsley or mint for fresh flavor.	☐
Day 30	Write your questions for your next appointment on a Doctor Visit Prep page.	☐

WEEKLY CHECK-IN

Week 1: Days 1 to 7

MORNING AVERAGE	EVENING AVERAGE	TOTAL WALK MINUTES
/	/	

SALT SWAP DAYS	POTASSIUM FOOD DAYS	5-MIN CALM DAYS
/ 7	/ 7	/ 7

AVERAGE WATER (GLASSES)	AVERAGE SLEEP (HOURS)	IDEAS TRIED
		/ 7

What went well

What got in the way

One habit I'll keep

One small thing to try next week

Anything to tell my doctor?

> *Week 1 is about rhythm, not perfection. Same times and a few ticks a day build your base.*
>
> **Coach Luke**

WEEKLY CHECK-IN

Week 2: Days 8 to 14

MORNING AVERAGE	EVENING AVERAGE	TOTAL WALK MINUTES
_____ /	_____ /	_____
SALT SWAP DAYS	**POTASSIUM FOOD DAYS**	**5-MIN CALM DAYS**
_____ / 7	_____ / 7	_____ / 7
AVERAGE WATER (GLASSES)	**AVERAGE SLEEP (HOURS)**	**IDEAS TRIED**
_____	_____	_____ / 7

What went well

What got in the way

One habit I'll keep

One small thing to try next week

Anything to tell my doctor?

> *By now some habits feel easier. Keep those, and pick one tricky habit to make a little simpler next week.*
>
> **Coach Luke**

WEEKLY CHECK-IN

Week 3: Days 15 to 21

MORNING AVERAGE	EVENING AVERAGE	TOTAL WALK MINUTES
/	/	

SALT SWAP DAYS	POTASSIUM FOOD DAYS	5-MIN CALM DAYS
/ 7	/ 7	/ 7

AVERAGE WATER (GLASSES)	AVERAGE SLEEP (HOURS)	IDEAS TRIED
		/ 7

What went well

What got in the way

One habit I'll keep

One small thing to try next week

Anything to tell my doctor?

> *Read your log without judging the numbers. Patterns are useful for you and your doctor.*
>
> **Coach Luke**

WEEKLY CHECK-IN

Week 4: Days 22 to 30

MORNING AVERAGE	EVENING AVERAGE	TOTAL WALK MINUTES
/	/	

SALT SWAP DAYS	POTASSIUM FOOD DAYS	5-MIN CALM DAYS
/ 9	/ 9	/ 9

AVERAGE WATER (GLASSES)	AVERAGE SLEEP (HOURS)	IDEAS TRIED
		/ 9

What went well

What got in the way

One habit I'll keep

One small thing to try next week

Anything to tell my doctor?

> *Last stretch. Choose the habits you want to keep after Day 30 and write them down so they stick.*
>
> **Coach Luke**

DAY 30

30-Day Reflection

Look back over your tracker and your log. This is about what you learned and what you want to keep, not about grading yourself.

	MORNING AVERAGE	EVENING AVERAGE
My first week	/	/
My most recent week	/	/

Habits that felt easiest

Habits that felt hardest

My top 3 habits to keep

What I'll share with my doctor

A note to myself for the next 30 days



Keep Going

Thank you for trusting me with your daily routine. Small habits you keep, written down day after day, give you and your doctor a clear picture to work from.

Keep checking, keep logging and bring this log to each visit.

Coach Luke

NASM-CPT, CES, PES · NESTA Nutrition Coach · 20+ years in health and fitness

911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

This log is a tracking tool for general education. It is not medical advice, a diagnosis or a treatment plan, and it is not a substitute for care from your doctor. Never start, stop or change any medication without your doctor. Talk to your doctor before changing your diet or activity, especially if you have heart or kidney disease or diabetes, are pregnant, or take medicines that affect potassium.



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YOUR FREE BONUS

Coaching Emails + Free Library

Thank you for buying from my shop. Your bonus is already on its way, and there is nothing to sign up for.

10 coaching check-in emails start automatically

Over the next 30 days I will send you 10 short check-ins that walk you through this log and the habit tracker: how to take a clean reading, how to work out your averages, how to keep the daily habits small, and how to get ready for your next visit. Look for emails from Coach Luke. If the first one isn't there, check your spam or promotions folder.

Free Resource Library

Scan the code or **visit coachluke.com/free-library** for free printable guides, trackers and recipes from me. New ones are added often.

Questions about your file?

Email me at **coach@coachluke.com** or reply to any coaching email. I read every one.



911 **Call 911:** 180/120 or higher with chest pain, shortness of breath, back pain, numbness, weakness, vision change or trouble speaking. Bring this log to your doctor or pharmacist.

A tracking tool, not medical advice. Never start, stop or change any medication without your doctor.