

SLEEP DIARY

Example

Please complete in the morning soon after waking.	<i>Tuesday</i> <i>3/25</i>	_____ /	_____ /	_____ /	_____ /	_____ /	_____ /	_____ /
1. Yesterday, I napped from ____ to ____ (Note the times of all naps)	<i>1:50 to</i> <i>2:30pm</i>							
2. Yesterday, I took ____ mg of medication and/or ____ oz of alcohol as sleep aid.	<i>Halcion</i> <i>0.125 mg</i>							
3. Last night, I went to bed and turned the lights off at ____ o'clock (AM or PM).	<i>10:45pm</i> <i>11:15pm</i>							
4. Last night, after turning the lights off, I fell asleep in ____ minutes.	<i>40 min</i>							
5. Last night, my sleep was interrupted ____ times (specify number of nighttime awakenings).	<i>3</i>							
6. Last night, my sleep was interrupted for ____ minutes (specify duration of each awakening).	<i>10</i> <i>5</i> <i>45</i>							
7. This morning, I actually awoke at ____ o'clock (note time of last awakening).	<i>6:15am</i>							
8. This morning, I actually got out of bed at ____ o'clock (specify the time).	<i>6:40am</i>							
9. When I got up this morning I felt ____ (answer on a 1 to 5 scale; 1 = exhausted, 5 = refreshed).	<i>2</i>							
10. Overall, my sleep last night was ____ (answer on a 1 to 5 scale; 1 = restless, 5 = very sound).	<i>3</i>							

Weekly Total Sleep Time: _____	This Week's Sleep Window: _____
Weekly Time in Bed: _____	Medication Adjustment: _____
Weekly Sleep Efficiency: _____	