SLEEP DIARY
Sleepiness and Fatigue Rating Scale

SLEEPINESS AND FATIGUE RATING SCALE: (AVERAGE RATING FOR UNDERLINE THE WHOLE DAY FOLLOWING A GIVEN SLEEP EPISODE)

	0	25	50	75	100
SLEEPINESS:	Extremely Sleepy	Somewhat Sleepy	Neither	Somewhat Alert	Very Alert
FATIGUE:	Extremely Fatigued	Somewhat Fatigued	Neither	Somewhat Energetic	Very Energetic

WEEK ONE
Complete After Getting Out of Bed

NEXT DAY

Example

Day & Date	Naps: time & sleep time	Unusual stressors, alcohol, & medications for sleep	Time you went to bed	Time it took you to fall sleep	# of awakenings	*Amount of time awake	Time you got up for the day	Total sleep time	Sleepiness Rating	Fatigue Rating
Sunday 5/20/23	3pm 1hr	Argument at dinner, 2 beers fr 6-8pm, Ambien 10mg at	10 pm	30min	3	30min	6am	7hrs	75	45

*Amount of time awake: this is all the time you spent awake during the night, from the first time you awakened to the time you got out of bed. It does not include the time it took you to fall asleep initially.

Signature: _____

Date: _____

SLEEP & WELLNESS INSTITUTE OF TEXAS

SLEEPINESS AND FATIGUE RATING SCALE: (AVERAGE RATING FOR THE WHOLE DAY FOLLOWING A GIVEN SLEEP EPISODE)

	0	25	50	75	100
SLEEPINESS:	Extremely Sleepy	Somewhat Sleepy	Neither	Somewhat Alert	Very Alert
FATIGUE:	Extremely Fatigued	Somewhat Fatigued	Neither	Somewhat Energetic	Very Energetic

WEEK TWO
Complete After Getting Out of Bed

NEXT DAY

Example

Day & Date	Naps: time & sleep time	Unusual stressors, alcohol, & medications for sleep	Time you went to bed	Time it took you to fall sleep	# of awakenings	*Amount of time awake	Time you got up for the day	Total sleep time	Sleepiness Rating	Fatigue Rating
Sunday 5/20/23	3pm 1hr	Argument at dinner, 2 beers fr 6-8pm, Ambien 10mg at	10 pm	30min	3	30min	6am	7hrs	75	45

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