**Week Beginning:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measuring the patterns of your sleep** | **Day 1** | **Day 2** | **Day 3** | **Day 4** | **Day 5** | **Day 6** | **Day 7** |
| 1. What time did you wake up at this morning?
2. What time did you rise from the bed this morning?
3. What time did you go to bed last night?
4. What time did you put the light out?
5. How long did it take you to fall asleep?
6. How many times did you wake during the night?
7. How long were you awake during the night?
8. How long did you sleep altogether?
9. How much alcohol did you have last night?
10. How many sleeping pills did you take?
 |  |  |  |  |  |  |  |
| **Measuring the Quality of Your Sleep** |  |  |  |  |  |  |  |
|  How well rested do you feel this morning? 0 1 2 3 4 Not at all Moderately Very |
| Was your sleep of good quality? 0 1 2 3 4 Not at all Moderately Very |

Some tips on completing your Sleep Diary

DO

* Complete your diary within 1 hour of rising from bed
* Write down times to the nearest 5 to 10 minutes if you can
* Double-check your answers

DON’T

* Clock-watch during the night
* Worry about it (it is just a record of your sleep)
* Make up answers (it’s ok to leave it blank if you forget)