

Sleep diary



**ASSIGN
BUSTER**

SLEEP DIARY Date _____ Complete after awakening: Time you went to bed _____ Time you fell asleep _____ Time you woke up _____ Number of times awakened during the night _____ Amount of time awake during the night _____ Total Nighttime Sleep _____ Comments on quality of night's sleep:

_____ Did you feel groggy after getting up in the morning? Yes ____ If yes, for how long? _____

Complete at the end of the day: Naps: Time fell asleep

_____ Time awoke _____ Total Nap Time _____

Comments on quality of naps:

_____ Using the

Stanford Sleepiness scale below, note your alertness during the day. 1. 2. 3.

4. 5. 6. 7. Feeling active, vital, alert, wide awake Functioning at a high level, not at peak Relaxed, not full alertness, responsive A little foggy, not at peak,

let down Fogginess, losing interest, slowed down Sleepiness, prefer to by

lying down Almost in a reverie, hard to stay awake 6 AM 8AM 10 AM NOON 2

PM 4 PM 6 PM 8 PM 10 PM MDNT No ____ How was your overall

sleepiness/alertness today (1-7)? _____ Other comments on mental

and physical: _____

_____ Complete after

awakening (using back of this page): 1. 2. 3. Do you remember any of your

dreams? If so, write down every detail you can remember about the dream.

Explain any latent content (relationship to deep wishes and goals) in the

above dream. Explain any manifest content (relationship to events occurring

in daily life) in the above dream.