***AM Diary***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Example  |  |  |  |  |  |  |  |
|  | Date (Day of the Week) | *12/11 (Mon)* |  |  |  |  |  |  |  |
| Q1.  | What time did you get in bed last night? | *11:00pm* |  |  |  |  |  |  |  |
| Q2.  | What time did you try to go to sleep? | *11: 30pm* |  |  |  |  |  |  |  |
| Q3.  | How long did it take for you to fall asleep?  | *1 hr 15 mins* |  |  |  |  |  |  |  |
| Q4.  | How many times did you wake up after you first fell asleep? | *2-3* |  |  |  |  |  |  |  |
| Q5.  | In total, how long did these awakenings last? | *40 mins* |  |  |  |  |  |  |  |
| Q.6  | What time was your final awakening? | *6:10am* |  |  |  |  |  |  |  |
| Q7.  | After your final wakening, how long did you spend in bed trying to sleep (Snooze)?  | *none* |  |  |  |  |  |  |  |
| Q8.  | Did you wake up earlier than you planned? | *no* |  |  |  |  |  |  |  |
| Q9.  | If yes, how much earlier? | *--* |  |  |  |  |  |  |  |
| Q10.  | What time did you get out of bed? | *6:30am* |  |  |  |  |  |  |  |
| Q11. | In total, how many hours were you physically in bed (Q10 – Q1)? | *7.5 hrs* |  |  |  |  |  |  |  |
| Q12.  | In total, how many hours did you sleep? | *5 hrs 15 mins* |  |  |  |  |  |  |  |
| Q13.  | How would you rate your sleep quality? | [ ]  Very Poor[x]  Poor[ ]  Fair[ ]  Good[ ]  Very Good | [ ]  Very Poor[ ]  Poor[ ]  Fair[ ]  Good[ ]  Very Good | [ ]  Very Poor[ ]  Poor[ ]  Fair[ ]  Good[ ]  Very Good | [ ]  Very Poor[ ]  Poor[ ]  Fair[ ]  Good[ ]  Very Good | [ ]  Very Poor[ ]  Poor[ ]  Fair[ ]  Good[ ]  Very Good | [ ]  Very Poor[ ]  Poor[ ]  Fair[ ]  Good[ ]  Very Good | [ ]  Very Poor[ ]  Poor[ ]  Fair[ ]  Good[ ]  Very Good | [ ]  Very Poor[ ]  Poor[ ]  Fair[ ]  Good[ ]  Very Good |
| Q14. | How rested or refreshed when woke up for the day? | [ ]  Not at all rested[x]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested | [ ]  Not at all rested[ ]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested | [ ]  Not at all rested[ ]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested | [ ]  Not at all rested[ ]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested | [ ]  Not at all rested[ ]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested | [ ]  Not at all rested[ ]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested | [ ]  Not at all rested[ ]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested | [ ]  Not at all rested[ ]  Slightly rested[ ]  Somewhat rested[ ]  Well-rested[ ]  Very well-rested |

# Please fill out the AM diary in the morning about the previous night’s sleep. Don’t worry about being very accurate. Your estimates will be sufficient.

***PM Diary***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Example  |  |  |  |  |  |  |  |
|  | Date (Day of the Week) | *12/11 (Mon)* |  |  |  |  |  |  |  |
| Q1.  | Did you nap? When? How long? | *2pm**2hrs 15 mins* |  |  |  |  |  |  |  |
| Q2.  | Did you consume any caffeinated beverages or foods? When? How much? | *7am1 coffee**1pm**1 coffee**7pm**1 green tea* |  |  |  |  |  |  |  |
| Q3.  | Did you drink any alcoholic beverages? When? How much? | *9pm**2 glasses of wine* |  |  |  |  |  |  |  |
| Q4.  | Did you take any over-the-counter or prescription medications to help you sleep? If yes, list the medications, dose, and time taken | *None* |  |  |  |  |  |  |  |
| Q5. | Comments (if applicable) |  |  |  |  |  |  |  |  |

\* Please fill out the PM diary in the evening.