

SLEEP HISTORY

Please answer the questions below to the best of your ability. Keep in mind the following:

- a) Answer them in relation to the past month, unless otherwise specified.
- b) A "weekday" should be thought of as any day that you routinely work.
- c) If you are engaged in shift work or have any type of unusual sleep/wake schedule, "day" and "night" should be interpreted as your major wake and sleep periods respectively.

NAME: _____

DATE: _____

My main sleep complaint involves (mark all that apply and describe):

trouble sleeping at night being sleepy all day unwanted behaviors during sleep (explain below) other

Please describe your sleep problem(s): _____

My sleep/wake problem began (date and details): _____

What have you done to treat your problem? _____

I hope the Sleep Medicine Associates staff will help me by: _____
