## Daily Sleep Diary

Complete the diary each morning - "Day 1" will be your first morning. Do not worry too much about giving exact answers, as an estimate will do.

|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Enter the weekday and date | What time did you try to fall asleep last night? | After settling down, how long did it take you to fall asleep? | After falling asleep, how many times did you wake up during the night? | After falling asleep, how much time did you spend awake in total? | What time did you finally wake up? | What time did you get out of bed? | What sleep aids, including alcohol, did you take last night? | What was the total dosage/ quantity of sleep aids? | How rested did you feel this morning? 12345 (Poor to Good) |
| DAY 1 |  |  |  |  |  |  | a. b. c. | a. <br> b. <br> c. |  |
| DAY 2 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 3 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 4 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 5 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 6 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 7 |  |  |  |  |  |  | a. <br> b. c. | a. <br> b. <br> c. |  |
| DAY 8 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 9 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 10 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 11 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 12 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 13 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |
| DAY 14 |  |  |  |  |  |  | a. <br> b. <br> c. | a. <br> b. <br> c. |  |

