

DAY LOG

| DATE/DAY | | | | | AVERAGE |
|---|--|--|--|--|---------|
| (Fill in each evening just before going to bed) | | | | | |
| Caffeinated drinks? How many? | Before 5PM | | | | |
| | After 5 PM | | | | |
| Alcoholic drinks? How many? | Before 5PM | | | | |
| | After 5 PM | | | | |
| Nicotine use? How many cigarettes, | Before 5PM | | | | |
| other forms? | After 5 PM | | | | |
| Exercise? | Before 5PM | | | | |
| | After 5 PM | | | | |
| Naps? | Time of day | | | | |
| | How long? | | | | |
| Stress during your day? | Y/N | | | | |
| Feel sleepy during the day? | Y/N | | | | |
| Mood in general during day? | 1=poor; 2=fair; 3=good; 4=excellent | | | | |
| Overall function during day? | 1=poor; 2=fair; 3=good; 4=excellent | | | | |
| Additional items to track: (list) | | | | | |
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NIGHT LOG



| DATE/DAY | | | | | |
|--|--|--|--|--|--|
| Fill in each morning immediately after getting out of bed | | | | | |
| 1. What time did you go to bed last night? | | | | | |
| 2. How long did it take you to fall asleep? | | | | | |
| 3. How many times did you wake up during the night? | | | | | |
| 4. For how long in total were you awake during the night? | | | | | |
| 5. How much time did you spend out of bed during the night? | | | | | |
| 6. What time did you wake up this morning? | | | | | |
| 7. What time did you get out of bed this morning? | | | | | |
| 8. Did you take a sleeping pill last night? (Y?N) | | | | | |
| 9. Generally speaking, how well do you feel this morning? (1=Not well; 2=Just OK; 3=Fine; 4=Very well) | | | | | |
| 10. How enjoyable was your sleep last night? (1=Not good; 2=Just OK; 3 Good; 4=Very good) | | | | | |
| | | | | | |
| 11. TIME IN BED (TIB) = time between # 1 and # 7 | | | | | |
| 12. WAKE AFTER SLEEP ONSET (WASO) – Time awake after first falling asleep and before getting out of bed in the morning = #4 + (time between #6 and #7) | | | | | |
| 13. TOTAL SLEEP TIME (TST) = #11 - (#2 + #12) | | | | | |
| 14. SLEEP EFFICIENCY = TST (#13) / TIB (#11) | | | | | |

How to Use Your Sleep Logs

Sleep logs are a very important part of your sleep therapy program. They provide us with information about your sleep patterns and allow us to monitor your progress throughout the program. Each day you will be asked to fill in two sleep logs: one in the morning and one in the evening. This will only take a couple minutes of your day. Included is an example of how to fill out your sleep logs.

Night Sleep Log

The night sleep log asks questions about your sleep the previous night and provides us with the information we need to initiate therapy. It is very important to complete these sleep logs for at least one week, preferably two weeks, before your first session so that we have enough information to begin therapy. Some questions on this sleep log include:

1) What time did you go to bed last night?

This includes any time you spent reading, watching tv, or conversing, etc. before going to sleep.

2) How long did it take you to fall asleep?

This is an <u>estimation</u> of the amount of time it took you to fall asleep after shutting off your lights with the intention of going to sleep, also known as sleep latency or SL Do not watch the clock as this can make falling asleep more difficult.

3) How many times did you wake up during the night and for how long in total?

Count any time you were awake enough to be fully aware. If you are not sure if you were awake, do not count it.

4) For how long in total were you awake during the night?

Estimate the amount of time you were awake. Do not watch the clock.

6) What time did you wake up this morning?

This is the last time you woke up and became fully alert without going back to sleep again.

7) What time did you get out of bed this morning?

This is the time that you arose from bed to start your day. This may be different from your final awakening time (question 6).

11) TIME IN BED

How many hours passed between the time you went to bed and woke up to start the day? This value, also know as TIB, is the amount of time that passed between question one and seven. For example, if you went to bed at 12:00am and woke up at 7:00am, your TIB would be seven hours or 420 minutes.

12) WAKE AFTER SLEEP ONSET

This value, also known as WASO, is the amount of time that you were awake after first falling asleep last night and before getting out of bed this morning. Add question four and the difference between question 6 and question 7 together. For example, if you woke up once during the night for 30 minutes and were awake for 50 minutes in the morning before getting out of bed, WASO would be 80 minutes.

WASO = Question 4 + (time between Question 6 and Question 7)

13) TOTAL SLEEP TIME

How many hours total did you sleep last night? This value, also known as TST, includes only the amount of time you were actually sleeping. To calculate this value, WASO (question 12) subtract from TIB (question 11). For example, we determined the TIB to be 420 minutes, so subtracting 80 from 420 gives us 340 minutes. This means that you actually slept for 340 minutes.

TST = Question 11 - Question 12

14) SLEEP EFFICIENCY

Your sleep efficiency is a measure of how well you are sleeping and is used as a guideline for your sleep therapy. It is calculated by dividing your TST (question 13) by your TIB (question 11). For example, if your TST is 340 minutes and your TIB is 420 minutes, your sleep efficiency would = 340/420 = 0.80 = 80%

Day Sleep Log

This log asks questions about your activities during the day. This information helps us to identify any habits that may be interfering with your sleep. Some habits asked about include:

- Caffeine consumption throughout the day: Caffeine is a stimulant and is found in many common products including coffee, tea, pop, energy drinks and chocolate.
- Alcohol consumption throughout the day: Measure alcohol by ounces (oz). One ounce (one shot)
 of hard liquor is about equal to a glass of wine or a can of beer. Don't get too caught up in
 calculating the exact amount of alcohol consumed.
- Nicotine use: Write down how much nicotine was used, e.g. 3 cigarettes.
- Exercise throughout the day: Write down what kind of exercise you did and for how long.
- Naps: Write down how many naps you took during the day, what time and an estimate of the length of time you napped.