

# THE EPWORTH SLEEPINESS SCALE

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_ MALE / FEMALE

How likely are you to doze off or fall asleep in the following situations, in contrast to just being tired? This refers to your usual way of life in recent times. Even if you have not done some of these things recently, try to work out how they would have affected you. Use the following scale to choose the *most appropriate number* for each situation:

- 0 = would *never* doze**
- 1 = *slight* chance of dozing**
- 2 = *moderate* chance of dozing**
- 3 = *high* chance of dozing**

<u>SITUATION</u>	<u>CHANCE OF DOZING</u>
Sitting and Reading	_____
Watching TV	_____
Sitting inactive in a public place (i.e. a movie theater or meeting)	_____
Lying down to rest in afternoon	_____
Sitting and talking to someone	_____
Sitting quietly after lunch without alcohol	_____
In a car, while stopped for a few minutes in traffic	_____
As a passenger in a car for 2 hours without a break	_____

THANK YOU FOR YOUR COOPERATION