

Sleep Diary

Name: _____

Information to record:		Example:	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
At night before you turn out the lights:	Day and date	<i>Mon 30/08</i>							
	Naps (in minutes)	<i>90 minutes</i>							
	Dinner time	<i>7pm</i>							
	Caffeine/alcohol (amount and time)	<i>1 coffee at breakfast, 1 glass of wine with dinner</i>							
	Medications	<i>2 panadol at 10am</i>							
	Cigarettes (amount and time)	<i>8am, 10am, 1pm, 5pm, 9pm</i>							
	Relaxation/quiet time (amount and time)	<i>30 minutes at 8am</i>							
	Before bed activities	<i>Watched TV</i>							
	In bed activities	<i>Read for 30 minutes</i>							
	Average energy level during the day (1-10) *	<i>5</i>							
Comments	<i>Argument with partner in the evening</i>								
Next morning after final waking:	Lights out time	<i>10pm</i>							
	Minutes to fall asleep	<i>45 minutes</i>							
	Times awoke after first falling asleep	<i>3 times</i>							
	Total minutes awake after first falling asleep	<i>1 hour</i>							
	Final waking time	<i>6am</i>							
	Time got out of bed	<i>7am</i>							
	Total hours asleep	<i>6.25 hours</i>							
	Quality of sleep (1-10) *	<i>4</i>							
Feeling at waking (1-10) *	<i>4</i>								

* Note: For ratings, use 1=lowest/worst, 10 = best/highest