EPWORTH SLEEPINESS SCALE[1]

Patient Name: _____ DOB: _____

Date of Evaluation: _____ ☐ Before therapy ☐ After therapy

Question:

In contrast to just feeling tired, how likely are you to doze off or fall asleep in the following situations?

Note: This refers to your usual way of life in recent times. Even if you haven't done some of these things recently try to work out how they would have affected you.

Directions:

Circle the most appropriate number for each situation. Then, enter that number in the "Score" column on the far right. Add the numbers in the "Score" column to calculate the Total Score.

Rate the Following Situations:

Example Situation	**Never**	**Slight Chance**	**Moderate Chance**	**High Chance**	**Score**
Lying down to rest in the afternoon	0	1	(2)	3 →	2

Situation	**Never**	**Slight Chance**	**Moderate Chance**	**High Chance**	**Score**
Sitting and reading	0	1	2	3	
Watching television	0	1	2	3	
Sitting inactive in a public place (i.e. theater)	0	1	2	3	
As a car passenger for an hour without a break	0	1	2	3	
Lying down to rest in the afternoon	0	1	2	3	
Sitting and talking to someone	0	1	2	3	
Sitting quietly after lunch without alcohol	0	1	2	3	
In a car, while stopped for a few minutes in traffic	0	1	2	3	
				Total Score	

[1] Reference: Johns MW. A new method for measuring daytime sleepiness: the Epworth Sleepiness Scale. Sleep 1991; 50-55.

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