Colleen C. Hickle, DDS

Cosmetic and Restorative Dentistry

Sleep Questionnaire

How likely are you to doze or fall asleep in the following situations, in contrast to feeling “just tired”?

This refers to your usual way of life at present and in the recent past. Even if you have not done some of these things recently, try to work out how they would have affected you.

***Choose the most appropriate number for each:***

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

Sitting and reading ……………………………………. 0 1 2 3

Watching TV……………………………………………. 0 1 2 3

Sitting, inactive in a public place (theater or meeting) 0 1 2 3

As a passenger in a car for an hour w/o 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 w/o alcohol………………… 0 1 2 3

In a car while stopped for a few minutes…………….. 0 1 2 3

*Total Score*  ­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_

**Epworth Scale Values: Interpretation of Data**

0-7 It is unlikely that you are abnormally sleepy

8-9 You have an average amount of daytime sleepiness

10-15 You may be excessively sleepy, depending on the situation and may want to consider

 Seeking medical attention

16-24 You are excessively sleepy and should consider seeking medical attention