# NOT SLEEPING WELL?

## FILL OUT THIS QUICK EVALUATION
## TO SEE IF YOU NEED YOUR SLEEP TESTED

**Please answer the following questions using the 0-4 scale below them. For example, on question 1, if you circle 0 then you are saying your sleep is Very Refreshing. If you circle 4 then you are saying your sleep is Not Refreshing.**

1. In general, would you describe your sleep as: (CIRCLE one number)
   Very Refreshing 0 1 2 3 4 Not Refreshing

2. What is the QUALITY of your sleep? (CIRCLE one number )
   Good 0 1 2 3 4 Poor

3. On a scale of 0 to 4, how SLEEPY are you during the day? (CIRCLE one number)
   Not Sleepy 0 1 2 3 4 Extremely Sleepy

4. On a scale of 0 to 4, how TIRED are you during the day? (CIRCLE one number)
   Not Tired 0 1 2 3 4 Extremely Tired

5. Rate your difficulty falling asleep?
   No Difficulty 0 1 2 3 4 Extreme Difficulty

6. If awakened, rate you difficultly RETURNING to sleep?
   No Difficulty 0 1 2 3 4 Extreme Difficulty

Healthy Sleep
Healthy Life

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|---|---|---|
| 7. Do you wake up a lot during your sleep? (Circle ->) | YES =4 | NO=0 |
| 8. Would you or others say you SNORE? (Circle ->) | YES =4 | NO=0 |
| 9. Would you or others say that you have other TROUBLE BREATHING while you sleep, such as stop breathing, choking, gasping, or struggling for breath? (Circle ->) | YES =4 | NO=0 |
| 10. Do you wake up at night to use the bathroom? | YES =4 | NO=0 |
| 11. Is your mouth dry upon awakening in the morning? | YES =3 | NO=0 |
| 12. Do you wake up with a morning headache? | YES =2 | NO=0 |
| 13. Do you have difficulty with concentration? | YES =2 | NO=0 |
| 14. Do you have difficulty with memory? | YES =2 | NO=0 |
| 15. Do you have trouble controlling your blood pressure? | YES =2 | NO=0 |

**Please compute your score by adding up the numbers to your answers.** **TOTAL _____**

If you scored a 10 or above, you may need a sleep evaluation as this score suggests poor sleep quality. Please present this questionnaire to your physician so they can order the proper sleep evaluation from The New Mexico Center for Clinical & Behavioral Sleep Medicine (575)434-6000.

New Mexico Center for
Clinical & Behavioral Sleep Medicine
A Department of Gerald Champion Regional Medical Center
*Promoting Healthy Sleep for a Healthy Life*