SLEEP CLINIC PATIENT DIARY

Patient N	ame	!										Date:													
Activity Symbols A - each alcoholic drink C - caffeinated drink, coffee, tea, Cola, chocolate M - meal P - sleeping pill or tranquilizer This diary is to be used for 7 days pri						D - noise (disturbed sleep) S - snack X - exercise N - nap						INSTRUCTIONS Take this diary with you and fill in activities according to the symbols. Please use example below as a reference.								Sleep Time Symbols B Go to bed T Toilet U Get out of bed I Sleeping time. W Wake up					
I his diary	is to b	e usec 10	11 11	days p 12	orior to	comii 2	1 g to t	ne Sie	ep Lab 5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	
xample	am	am	am	pm	pm	pm	pm	pm	pm	pm	pm	pm	pm	pm	pm	am	am	am	am	am	am	am	am	am	
Activity				M C		N	N	N		CM AT															
Sleep Time														B P	I	I	I	I	U T	I	-		I	W	
	Lights	out at	10 pi	m	am	pm Total sleep time _				6	_6hours Total time in bed:					10	hours								
Day 1	9 am	10 am	11 am	12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm	12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	
Activity																									
Sleep Time																									
	Lights out atar					pm Total sleep time						hours Total time in bed:								hours					
Day 2	9 am	10 am	11 am	12 pm	1 pm	2 pm	3 pm	4 pm	5 pm	6 pm	7 pm	8 pm	9 pm	10 pm	11 pm	12 am	1 am	2 am	3 am	4 am	5 am	6 am	7 am	8 am	
Activity																									
Sleep Time																									
	Lights	out at			_am pr	pm Total sleep time						hours Total time in bed:							hours						

SLEEP CLINIC PATIENT DIARY Halton Healthcare - Oakville Trafalgar Memorial Hospital **Patient Name:** Date: 12 2 3 3 5 6 8 10 11 5 6 8 9 10 11 12 2 Day 3 am am am am pm am am am am am am am Activity Sleep Time Total time in bed: Lights out at ___ Total sleep time _____ _am pm hours hours 10 11 12 3 10 11 2 3 Day 4 am am am pm am am am am am am am am am Activity Sleep Time Lights out at Total sleep time _____ Total time in bed: am pm hours hours 10 11 12 2 3 5 6 8 9 10 11 12 2 3 4 5 6 8 1 Day 5 pm pm pm am am pm pm pm pm pm pm pm pm pm am am am am am am am am am Activity Sleep Time Total time in bed: Lights out at Total sleep time am pm hours hours 3 10 11 12 6 8 10 11 12 2 3 5 8 Day 6 am pm pm pm pm pm am am am am am pm pm pm pm pm pm pm am am am am am Activity Sleep Time Lights out at _____ Total sleep time _____ hours Total time in bed: am pm hours 2 3 9 2 3 10 11 12 5 6 8 10 11 12 1 5 6 8 Day 7 am am am pm am am am am am am am am am Activity Sleep Time Lights out at ____ Total sleep time ___ hours Total time in bed: _am pm hours