GRANGER SLEEP & LUNG | *Murray West Jordan Tooele*

Patient Name: _____

Account number: _____

EPWORTH SLEEPINESS SCALE

Key

0 = would ***NEVER*** doze
1 = ***SLIGHT*** chance of dozing
2 = ***Moderate*** chance of dozing
3 = ***HIGH*** chance of dozing

Situation	Chance of Dozing (Use Key Above)			
Sitting and reading	0	1	2	3
Watching TV	0	1	2	3
Sitting, inactive in a public place (i.e. theater, meeting)	0	1	2	3
As a passenger in a car, for an hour without a break	0	1	2	3
Lying down to rest in the afternoon when circumstances permit	0	1	2	3
Sitting and talking with 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: _____