Sleep/activity Diary Template[1]

This is to give you an idea of the kind of information you could record to help you identify what is causing your sleeplessness. Try to keep the diary for two weeks. Don't worry about being too accurate, a general idea is enough to spot patterns.

Date of day 1_____

Complete in the morning

Start Date: Day of week:	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
What time did you go to bed last night?	PM AM	PM AM	PM AM	PM AM	PM AM	PM AM	PM AM
What time did you try and go to sleep?	PM AM	PM AM	PM AM	PM AM	PM AM	PM AM	PM AM
How long did it take you to fall asleep?	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.
What time did you get up in the morning?	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
How many times did you wake in the night?							
Number of times							
Number of minutes							
Last night I slept a total of:	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.	Hrs. Mins.

How would you rate your sleep quality?							
Very Poor	O	O	O	O	O	O	O
Poor	O	O	O	O	O	O	O
Fair	O	O	O	O	O	O	O
Good	O	O	O	O	O	O	O
Very Good	O	O	O	O	O	O	O

Any other comments about your sleep worth noting?

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Day of the week:							
I consumed caffeinated drinks in the: (M)orning, (A)fternoon, (E)vening, (N/A)							
M / A / E / NA							
How many?							
How much exercise did you get today?							
No. of minutes							
Time of day (morning, afternoon, evening, night)							
Did you have a nap today? (circle one)	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
If Yes, for how long?							
Approximately 2-3 hours before going to bed, I consumed:							
Alcohol	O	O	O	O	O	O	O
A heavy meal	O	O	O	O	O	O	O
Caffeine	O	O	O	O	O	O	O
Nicotine	O	O	O	O	O	O	O
Not Applicable	O	O	O	O	O	O	O
In the hour before going to sleep, my bedtime routine included. *List activities including reading a book, using electronics, taking a bath, doing relaxation exercises, talking on the phone etc*							