EPWORTH SLEEPINESS SCALE

Name:		
Age:		
Date:		
•	are you to doze or fall asleep in the following situation have not done some of these things recently, try to wo bu.	
Use the following scale to choose the most appropriate number for each situation.		
0 1 2 3	Would <u>never</u> doze <u>Slight</u> chance of dozing <u>Moderate</u> chance of dozing <u>High</u> chance of dozing	
<u>Situation</u> <u>Cha</u>		Chance of Dozing
Sitting and	Reading	
Watching t	elevision	
Sitting, inactive in a public place (e.g. theatre or meeting place		
As a passer	nger in a car for an hour without a break	
Lying down to rest in the afternoon when circumstances permit		
Sitting and talking to someone		
Sitting quietly after a lunch without alcohol		
In a car, while stopped for a few minutes in traffic		
TOTAL		
нетсит.	WEIGHT. RMI.	