

OTHER COMMENTS: \_\_\_\_\_

**EPWORTH SLEEPINESS SCALE (ESS)**

**Instructions:**

How likely are you to doze off or fall asleep in the following situations, in contrast to just feeling tired? This refers to your usual way of life in recent times. Even if you have not done some of these things recently, try to work out how they would have affected you. Use the following scale to choose the most appropriate number for each situation:

**0 = would never doze off**

**1 = slight chance of dozing off**

**2 = moderate chance of dozing off**

**3 = high chance of dozing off**

**SITUATION:**

**CHANCE OF DOZING:**

- |  |       |
|--|-------|
| 1. Sitting and reading   | _____ |
| 2. Watching T.V.   | _____ |
| 3. Sitting inactive in a public place (e.g. in a theater or meeting) | _____ |
| 4. As a passenger in a car for an hour without a break               | _____ |
| 5. Lying down to rest in the afternoon when the circumstances permit | _____ |
| 6. Sitting and talking to someone                                    | _____ |
| 7. Sitting quietly after lunch without alcohol                       | _____ |
| 8. In a car while stopped for a few minutes in traffic               | _____ |

**TOTAL\*** \_\_\_\_\_

**Wasatch Sleep Health Center**  
**1151 East 3900 South, Suite B240 • Salt Lake City • Utah • 84124**  
**Phone: (801) 281-1788 • Fax (801) 281-2788**