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Name: \_\_\_\_\_

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## Epworth Sleepiness Scale

Please indicate the likelihood that you would fall asleep in the following situations (scale of 0-3). The refers to your usual way of life in recent times. Use the following scale to choose the most appropriate number for each situation:

0= Would never doze

1= Slight chance of dozing

2= Moderate chance of dozing

3= High chance of dozing

Situation	Chance of Dozing
Sitting and Reading?	_____
Watching TV?	_____
Sitting inactive in a public place? (i.e. theater)	_____
As a passenger in a car for an hour without a break?	_____
Lying down to rest in the afternoon when able?	_____
Sitting and talking to someone?	_____
Sitting quietly after lunch without alcohol?	_____
In a car, while stopped for a few minutes in traffic?	_____
 Total	 _____

(A total score of 9 or above indicates excessive sleepiness.)