

Stanford Sleep Health and Insomnia Program: Two Week Sleep Diary
Adapted from the American Academy of Sleep Medicine

Instructions

1. Write the date, day of the week, and type of day: Work, School, Day Off, or Vacation.
2. Put the letter "M" in the box when you take any relevant medication.
3. Put a line (l) to show when you got into bed and a line when you got out of bed in the morning
4. Put a down arrow when you start intending to sleep and an up arrow when you got up (woke up and no longer intended to sleep)
5. Shade in the box that shows when you think you fell asleep and shade in all the boxes that show when you are asleep
6. Leave boxes unshaded to show when you wake up at night & when you are awake during the day. If you were asleep for a portion of an hour, you can shade a portion of a box.

Today's Date	Day of the week	Type of Day Work, School, Off, Vacation	Noon	1PM	2	3	4	5	6PM	7	8	9	10	11PM	Midnight	1AM	2	3	4	5	6AM	7	8	9	10	11AM
--------------	-----------------	---	------	-----	---	---	---	---	-----	---	---	---	----	------	----------	-----	---	---	---	---	-----	---	---	---	----	------

week 1

week 2