

# ALVARADO HOSPITAL

*Advanced medicine. Personalized care.*

## The Epworth Sleepiness Scale

Below is the Epworth Sleepiness Scale Test. This is a widely used test by sleep medicine specialists to determine if a person is sleepy. Print this out and share with your physician.

Date:

Name:

Address:

Telephone:

Age:

Gender (circle one): Male Female

**How likely are you to doze off or fall asleep in situations described in the box below, in contrast to feeling just tired?**

This refers to your usual way of life in recent times. Even if you haven't done some of these things recently, try to work out how they would have affected you.

Use the following scale (1-4) to choose the most appropriate number for each situation:

**0** = Would never doze

**2** = Moderate chance of dozing

**1** = Slight chance of dozing

**3** = High chance of dozing

### **Situation**

### **Chance of Dozing (1-4)**

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Sitting and reading

Watching TV

Sitting, inactive in public place (e.g. a theater or a meeting)

As a passenger 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 the traffic