

# EPWORTH SLEEPINESS SCALE

Completing the following questionnaire will help your physician to measure your general level of daytime sleepiness.

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

Date: \_\_\_\_\_

Date of birth: \_\_\_\_\_

**How likely are you to doze off or fall asleep in the situations described 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 to choose the most appropriate number for each situation:

<b>0</b>	<b>would never doze</b>
<b>1</b>	<b>light chance of dozing</b>
<b>2</b>	<b>moderate chance of dozing</b>
<b>3</b>	<b>high chance of dozing</b>

SITUATION	CHANCE OF DOZING			
Sitting and reading	0	1	2	3
Watching TV	0	1	2	3
Sitting, inactive in a public place (eg, a theater or a meeting)	0	1	2	3
As a passenger in a car for an hour without a break	0	1	2	3
Lying down to rest in the afternoon when circumstances permit	0	1	2	3
Sitting and talking to someone	0	1	2	3
Sitting quietly after a lunch without alcohol	0	1	2	3
In a car, while stopped for a few minutes in traffic	0	1	2	3

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The Epworth Sleepiness Scale (ESS) is a simple questionnaire intended to measure daytime sleepiness and has been validated in healthy adult persons and a variety of patient populations (1, 2). It is the most commonly used measure of daytime sleepiness in clinical research, having been employed in more than 800 clinical studies. Many primary care physicians and specialists use the ESS with their patients in order to determine if they suffer from excessive daytime sleepiness (EDS). Such determinations can be helpful when considering referrals for sleep consultations or polysomnography.

Daytime sleepiness is assessed by asking the patient to rate the probability of falling asleep in several different situations using a 0 – 3 scale.

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A total score of 10 or more may indicate EDS, and may be indicative of a sleep disorder. Disorders commonly associated with EDS include insufficient sleep, sleep apnea, narcolepsy, restless legs syndrome (RLS), and insomnia.

Tools such as the ESS are considered helpful in identifying patients with sleep disorders. You also may consider the use of additional resources such as the One Minute Sleep Quiz<sup>®</sup>, the Sleep Disorders Inventory<sup>®</sup>, and a sleep diary known as the Sleep Log<sup>®</sup>. These resources provide additional diagnostic aids, and are available to physicians at no cost. Resources may be found at [www.sleepny.com](http://www.sleepny.com).

## FOR MORE INFORMATION ON SLEEP DISORDERS...

1. Johns MW: Reliability and factor analysis of the Epworth Sleepiness Scale. *Sleep* 1992; 15(4):376-81
2. Johns MW: A new method for measuring daytime sleepiness: the Epworth Sleepiness Scale. *Sleep* 1991; 14(6):540-5