

7-Day Sleep Diary

NIGHTS 1-7

Fill this in within an hour of waking, while the night is still fresh. Estimates are fine - do not watch the clock during the night, as that tends to make sleep worse rather than better.

Night	To bed	Woke	Times awake	Awake for (approx)	Night sweats?	Sleep quality 1-5

WHAT WAS DIFFERENT ON THE BETTER NIGHTS?

Room temperature, bedding, caffeine, alcohol, screen time, exercise, stress, medication timing.

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DAYTIME AND PATTERNS

Sleep is easier to discuss with a clinician when the daytime picture sits alongside the night-time one.

Day	Energy 1-5	Naps (mins)	Caffeine after 2pm	Alcohol	Exercise	Notes

MY USUAL PATTERN

In one or two sentences, how would you describe a typical night this week?

WHAT I WANT TO ASK ABOUT SLEEP

Bring this to your appointment.
