



SOUTH ATLANTA PULMONARY & CRITICAL CARE ASSOCIATES, L.L.C.
AND
CENTER FOR SLEEP MEDICINE

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PULMONARY DISEASES
SLEEP MEDICINE
PULMONARY REHAB

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Board Certified in Sleep Medicine
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PATIENT NAME _____ DATE _____

EPWORTH SLEEPINESS SCALE

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

Scale

- 0 = would *never* doze
- 1 = *slight* chance of dozing
- 2 = *moderate* chance of dozing
- 3 = *high* chance of dozing

SITUATION

- Sitting and reading _____
- Watching TV _____
- Sitting, inactive in a public place (e.g., a theater or 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 lunch without alcohol _____
- In a car, while stopped for a few minutes in traffic _____

TOTAL _____

RESULTS

- 0 - 6 *You are getting enough sleep*
- 7 - 8 *Your score is average*
- 9 and up *Seek the advice of a specialist*