

Life Management Associates, LLC

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LMA

EPWORTH SLEEPINESS SCALE



LIFE MANAGEMENT ASSOCIATES, LLC

EPWORTH SLEEPINESS SCALE

Today's Date: ____/____/____ Client Name (First) _____ (MI) _____ (Last) _____
please print please print

Use the following scale to choose the most appropriate number for each situation:

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

Fill in your answers and see where you stand.

Situation	Chance of Dozing or Sleeping Please √, 0= Never, 1= Slight, 2= Moderate, Or 3= High,
1. Sitting and reading	0 __, 1 __, 2 __, Or 3 __
2. Watching TV	0 __, 1 __, 2 __, Or 3 __
3. Sitting inactive in a public place	0 __, 1 __, 2 __, Or 3 __
4. Being a passenger in a motor vehicle for an hour or more	0 __, 1 __, 2 __, Or 3 __
5. Lying down in the afternoon	0 __, 1 __, 2 __, Or 3 __
6. Sitting and talking to someone	0 __, 1 __, 2 __, Or 3 __
7. Sitting quietly after lunch (no alcohol)	0 __, 1 __, 2 __, Or 3 __
8. Stopped for a few minutes in traffic while driving	0 __, 1 __, 2 __, Or 3 __
Total score, (add up questions 1 thru 8, to get the total Epworth score)	_____ (This is your Epworth score)

The Epworth Sleepiness Scale is used to determine the level of daytime sleepiness. A score of **10 or more is considered sleepy**. A score of **18 or more is very sleepy**.

If you score **10 or more** on this test, you should consider whether you are obtaining adequate sleep, need to improve your sleep hygiene and/or **need to see a sleep specialist**.

These issues should be discussed with your personal physician.

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Navigating Life's Obstacles.....Choose LMA