



Epworth Sleepiness Scale (ESS)

Patient: _____ DOB: ____/____/____ Date: ____/____/____

How likely are you to doze off or fall asleep during different routine daytime situations, in contrast to just feeling tired?

Sleep disorders such as sleep apnea have been linked to heart conditions such as high blood pressure, arrhythmia and heart failure. In an effort to promote cardiovascular health, we are committed to identifying patients with sleep disorders. The Epworth Sleepiness Scale questionnaire will help measure your general level of daytime sleepiness which could help us gauge the quality of your sleep. It is important that you circle a number (0 to 3) for EACH situation. Even if you haven't done some of the activities recently, think about how they would have affected you.

Please use the following scale to rate the chance that you would doze off or fall asleep (NOT just feel tired) for each situation:

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

Table with 2 columns: Situation and Chance of Dozing (0-3). Rows include: 1. Sitting and Reading, 2. Watching Television, 3. Sitting inactive in a public place (theater/meeting), 4. As a passenger in a car for an hour without a break, 5. Lying down to rest in the afternoon, 6. Sitting and talking to someone, 7. Sitting quietly after lunch (with no alcohol), 8. In a car, while stopped in traffic.

TOTAL SCORE: _____