

ASSESSMENT: Adapted from the Sleep Hygiene Inventory (SHI)

How many days per week do you do the following?					0	1-2	3-4	5-6	7
					0 pt	1 pt	2 pt	3 pt	4 pt
I take daytime naps lasting two or more hours.									
I go to bed at different times from day to day.									
I get out of bed at different times from day to day.									
I exercise to the point of sweating within 1 hour of going to bed.									
I stay in bed longer than I should.									
I use alcohol, tobacco, or caffeine within 4 hours of going to bed.									
I do something that may wake me up before bedtime (eg, screens).									
I go to bed feeling stressed, angry, upset, or nervous.									
I use my bed for things other than sleeping or sex (eg, screens, read, study).									
I sleep on an uncomfortable bed (eg, poor mattress or pillow).									
I sleep in an uncomfortable bedroom (eg, too bright, too hot, cold, or noisy).									
I do important work before bedtime (eg, pay bills, schedule, study).									
I think, plan, or worry when I am in bed.									
Subtotals									
TOTAL score						Enter score below			
	0-25	Adequate sleep hygiene		26-34	Fair sleep hygiene		35-52	Poor sleep hygiene	