## **Sleep Impact Short Form**

Please respond to each question or statement by marking one box per row.

		Never	Rarely	Sometimes	Often	Always
SleepImpactQ2	In the past 7 days, how often did you stay up most of the night because you could not fall asleep?	5	4	3	2	1
SleepImpactQ5	In the past 7 days, how often was it very easy for you to fall asleep?	1	2	3	4	5
SleepImpactQ8	In the past 7 days, how often did you have a lot of trouble falling asleep	5	4	3	2	1
SleepImpactQ10	In the past 7 days, how often did you stay up all night because you could not fall asleep?	5	4	3	2	1
SleepImpactQ11	In the past 7 days, how often did you stay up half of the night because you could not fall asleep?	5	4	3	2	1