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Tyne and Wear
NHS Foundation Trust

My sleep diary



Caring | Discovering | Growing | **Together**

Sleep is important for your health and wellbeing. This sleep diary will help you to keep track of your sleeping routine. By taking a couple of minutes a day completing the sleep diary you'll be able to note your sleep habits and find out how your sleep can be improved.

Useful information

- [Sleep problems – Young Minds](#)

<https://youngminds.org.uk/find-help/feelings-and-symptoms/sleep-problems/>

- [Sleep tips for teenagers – NHS Choices](#)

<https://www.nhs.uk/live-well/sleep-and-tiredness/sleep-tips-for-teenagers/>

- [Sleeping problems – Northumberland, Tyne and Wear NHS Foundation Trust](#)

<https://web.ntw.nhs.uk/selfhelp/#sleeping>



Start date _/_/	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Day of week:	_____	_____	_____	_____	_____	_____	_____

Your bedtime routine

What do I do before I sleep eg phone, TV, computer, games console							
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Start date _/_/	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Day of week:	_____	_____	_____	_____	_____	_____	_____

Your sleep routine

What time I went to bed?							
What time did I sleep?							
What time did I wake up?							

1 – 10, 1 = easy 10 = very difficult

How much effort did it take to wake up?							
What time did I get out of bed?							
How many times I woke.							
How long for?							

Why was my sleep disturbed? eg noise, pets, lights, uncomfortable, stress, temperature

What did I do when I woke?							
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What helps?

What I do to help myself sleep.							
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Start date _ / _ / _	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Day of week:	_____	_____	_____	_____	_____	_____	_____

Activity

During the day did I feel sleepy?							
Did I have a nap?							
Time and length?							
If I did not nap how close was I to falling asleep?							
What exercise do I do?							
Time spent outside in natural light?							

Start date _ / _ / _	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Day of week:	_____	_____	_____	_____	_____	_____	_____

Medication

List medication:							
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Eating

What do I eat?							
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Drinking

What do I drink?							
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Your mood

Throughout the day how did I feel/what was my mood like?							
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