

| Functional Outcomes of Sleep Questionnaire (FOSQ-10) (reduced)

Name

Date of Birth Today's Date

Instructions

Some people have difficulty performing everyday activities when they feel tired or sleepy. The purpose of this questionnaire is to find out if you generally have difficulty carrying out certain activities because you are too sleepy or tired.

In this questionnaire, when the words "sleepy" or "tired" are used, it means the feeling that you can't keep your eyes open, your head is droopy, that you want to "nod off", or that you feel the urge to take a nap. These words do not refer to the tired or fatigued feeling you may have after you have exercised.

Directions

Please put a "✓" in the box for your answer to each question. Select only **one answer** for each question. Please try to be as accurate as possible. All information will be kept confidential.

Functional Outcomes of Sleep Questionnaire (FOSQ) (reduced)

Please mark "✓" as appropriate:

	1 Yes, extreme	2 Yes, moderate	3 Yes, a little	4 No
1 Do you have difficulty concentrating on the things you do because you are sleepy or tired?				
2 Do you generally have difficulty remembering things, because you are sleepy or tired?				
3 Do you have difficulty finishing a meal because you become sleepy or tired?				
4 Do you have difficulty working on a hobby (for example, sewing, collecting, gardening) because you are sleepy or tired?				
5 Do you have difficulty doing work around the house (for example, cleaning house, doing laundry, taking out the trash, repair work) because you are sleepy or tired?				
6 Do you have difficulty operating a motor vehicle for short distances (less than 100 miles) because you become sleepy or tired?				
7 Do you have difficulty operating a motor vehicle for long distances (greater than 100 miles) because you become sleepy or tired?				
8 Do you have difficulty getting things done because you are too sleepy or tired to drive or take public transportation?				
9 Do you have difficulty taking care of financial affairs and doing paperwork (for example, writing checks, paying bills, keeping financial records, filling out tax forms, etc.) because you are sleepy or tired?				
10 Do you have difficulty performing employed or volunteer work because you are sleepy or tired?				

FOSQ-10 Score