Insomnia Severity Index

The Insomnia Severity Index has seven questions. The seven answers are added up to get a total score. When you have your total score, look at the 'Guidelines for Scoring/Interpretation' below to see where your sleep difficulty fits.

For each question, please CIRCLE the number that best describes your answer.

*Please rate the CURRENT (i.e. LAST 2 WEEKS) SEVERITY of your insomnia problem(s).*

<table>
<thead>
<tr>
<th>Insomnia Problem</th>
<th>None</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Very Severe</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Difficulty falling asleep</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2. Difficulty staying asleep</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3. Problems waking up too early</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

4. How SATISFIED/DISSATISFIED are you with your CURRENT sleep pattern?
   - Very Satisfied: 0
   - Satisfied: 1
   - Moderately Satisfied: 2
   - Dissatisfied: 3
   - Very Dissatisfied: 4

5. How NOTICEABLE to others do you think your sleep problem is in terms of impairing the quality of your life?
   - Not at all Noticeable: 0
   - Noticeable: 1
   - A Little Noticeable: 2
   - Somewhat Noticeable: 3
   - Much Noticeable: 4

6. How WORRIED/DISTRESSED are you about your current sleep problem?
   - Not at all Worried: 0
   - Worried: 1
   - A Little Worried: 2
   - Somewhat Worried: 3
   - Much Worried: 4

7. To what extent do you consider your sleep problem to INTERFERE with your daily functioning (e.g. daytime fatigue, mood, ability to function at work/daily chores, concentration, memory, mood, etc.) CURRENTLY?
   - Not at all Interfering: 0
   - Interfering: 1
   - A Little Interfering: 2
   - Somewhat Interfering: 3
   - Much Interfering: 4

**Guidelines for Scoring/Interpretation:**

Add the scores for all seven items (questions 1 + 2 + 3 + 4 + 5 + 6 + 7) = _______ your total score

Total score categories:
- 0–7 = No clinically significant insomnia
- 8–14 = Subthreshold insomnia
- 15–21 = Clinical insomnia (moderate severity)
- 22–28 = Clinical insomnia (severe)

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