CBT-I Sleep Training

Recover The Healthy Natural Sleep You Need for Living Your Best Life.



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Personal Sleep Transformation Plan

- Rapid Relief:
 - "Shrink It" Schedule Bed Time:
 - Escape. Hang Out. Try Again.
 - Smart Naps
- Secrets of the Teflon Mind
- Enhanced Recovery Demand
- Ridiculous Art of Doing Nothing
- Healthy Sleep Habits
- Medication Escape Plan

Rise Time:

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Sleep Diary Instructions

General Instructions

What is a Sleep Diary? A sleep diary is designed to gather information about your daily sleep pattern.

How often and when do I fill out the sleep diary? It is necessary for you to complete your sleep diary every day. If possible, the sleep diary should be completed within one hour of getting out of bed in the morning.

What should I do if I miss a day? If you forget to fill in the diary or are unable to finish it, leave the diary blank for that day.

What if something unusual affects my sleep or how I feel in the daytime? If your sleep or daytime functioning is affected by some unusual event (such as an illness, or an emergency) you may make brief notes on your diary.

What do the words "bed" and "day" mean on the diary? This diary can be used for people who are awake or asleep at unusual times. In the sleep diary, the word "day" is the time when you choose or are required to be awake. The term "bed" means the place where you usually sleep.

Will answering these questions about my sleep keep me awake? This is not usually a problem. You should not worry about giving exact times, and you should not watch the clock. Just give your best estimate.

Item Instructions

Use the guide below to clarify what is being asked for each item of the Sleep Diary.

Date: Write the date of the morning you are filling out the diary.

1. What time did you get into bed? Write the time that you got into bed. This may not be the time that you began "trying" to fall asleep.

2. What time did you try to go to sleep? Record the time that you began "trying" to fall asleep.

3. How long did it take you to fall asleep? Beginning at the time you wrote in question 2, how long did it take you to fall asleep.

4. How many times did you wake up, not counting your final awakening? How many times did you wake up between the time you first fell asleep and your final awakening?

5. In total, how long did these awakenings last? What was the total time you were awake between the time you first fell asleep and your final awakening. For example, if you woke 3 times for 20 minutes, 35 minutes, and 15 minutes, add them all up (20+35+15= 70 min or 1 hr and 10 min).

6. What time was your final awakening? Record the last time you woke up in the morning.

7. What time did you get out of bed for the day? What time did you get out of bed with no further attempt at sleeping? This may be different from your final awakening time (e.g. you may have woken up at 6:35 a.m. but did not get out of bed to start your day until 8:20 a.m.)

8. How would you rate the quality of your sleep? "Sleep Quality" is your sense of whether your sleep was good or poor.

9. Comments If you have anything that you would like to say that is relevant to your sleep feel free to write it here.

Consensus Sleep Diary (Core Items Only) Sample

ID/Name: _____

	Sample		1		1			
Today's date	4/5/08							
1. What time did you get into bed?	10:15 p.m.							
2. What time did you try to go to sleep?	11:30 p.m.							
3. How long did it take you to fall asleep?	1 hour 15 min.							
4. How many times did you wake up, not counting your final awakening?	3 times							
5. In total, how long did these awakenings last?	1 hour 10 min.							
6. What time was your final awakening?	6:35 a.m.							
7. What time did you get out of bed for the day?	7:20 a.m.							
8. How would you rate the quality of your sleep?	 □ Very poor ☑ Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 Very poor Poor Fair Good Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 □ Very poor □Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good
9. Comments (if applicable)	Sleep Medication I have a cold Naps							

(Consensus Slee Sample	ep Diary (Core	Items Only)	I	D/Name:			_
Today's date	4/5/08							
1. What time did you get into bed?	10:15 p.m.							
2. What time did you try to go to sleep?	11:30 p.m.							
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4. How many times did you wake up, not counting your final awakening?	3 times							
5. In total, how long did these awakenings last?	1 hour 10 min.							
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8. How would you rate the quality of your sleep?	 □ Very poor ☑ Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 □ Very poor □Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 □ Very poor □Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good 	 □ Very poor □ Poor □ Fair □ Good □ Very good
9. Comments (if applicable)	Sleep Medication I have a cold Naps							

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Cost of Insomnia Checklist

In addition to its financial burden, poor sleep affects health, work, family, and social life in many ways. This checklist will help identify the full cost poor sleep is having for you personally. Please check the boxes for ALL that apply.

Financial Costs:

Lost work time:	\$ Devices:	\$
Lost work productivity:	\$ Healthcare Copays:	\$
Supplements:	\$ Healthcare Procedures:	\$
Medications:	\$ Total:	\$

Cost to Your Health:

- □ Sleep problem is making me sick
- □ Sleep is exacerbating illness
- □ Worried about risk of dementia
- News and or doctors tell me Insomnia is bad for me
- □ "Trapped" by medications
- Weight Gain

- Risk of fallsRisk of medical problems
- □ Too tired to exercise
- $\hfill\square$ Stressed without good reason
- □ Stay beautiful
- □ Aging stresses and complications

Family Cost:

- □ Not being the spouse I should be
- □ Not being the parent I should be
- □ Can't care for grandchildren
- Can't care for my home the way I should.
- □ Reconnect/grow closer with spouse (Unspoken?)

- Seen by friends and family as Unreliable or "flaky"
- □ Judged as lazy
- □ Irritability and unkindness
- □ Unable to babysit due to fatigue

Cognitive Cost:

- □ Memory and attention problems
- □ Make wise decisions
- Worried I won't be able to remain independent

Mental and Emotional Cost:

- □ Can't enjoy retirement
- Unable to enjoy all they worked so Hard for
- Unable to enjoy the wonderful life I have
- □ Don't feel rested and energetic
- □ Can't maintain my energy level
- Unable to feel grateful, content, and at peace
- □ Feel like a burden on friends and Family
- □ Unmotivated or uninterested
- □ Daytime Sleepiness and fatigue
- Daytime discomfort after a bad Night
- □ Feel helpless and out of control

Work Cost:

- \Box Give back to community
- □ Volunteer
- □ Judged as lazy

Social and Recreational Cost:

- □ Disconnected from friends
- Don't know if will feel well enough to participate in social activities
- Seen by friends and family as Unreliable or "flaky"
- □ Judged as lazy

- □ Use financial resources wisely
- $\hfill\square$ Avoid becoming a victim of fraud
- □ Avoid driving/Unable to drive
- □ Feel helpless, hopeless, and alone in solving problem of insomnia
- □ Worried because medications and other sleep solutions have not worked for me.
- Devices don't work (FitBit, Alpha Stim, Sleep Shepherd, etc.)
- □ Pills or supplements don't work
- □ Feel misunderstood by friends and Family
- $\hfill\square$ Overreacting to stress
- □ Worry about daytime function
- □ Worry about sleep
- □ Discomfort of sleeplessness
- Can't travel
- □ Unmotivated or uninterested
- Can't travel
- □ Irritability and unkindness
- $\hfill\square$ Social isolation
- Feel misunderstood by friends and Family

Dysfunctional Beliefs About Sleep Scale

Please indicate to what extent you personally agree or disagree with each statement by circling a number that indicates where your personal rating falls.

1. I need 8 hours of sleep to feel refreshed and function well during the day.

I. Theed o hours of sid	ep to leer len	esheu and	a runcin	Jii wen u	uning th	ie udy.					
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
2. When I don't get th sleeping longer.	e proper amou	unt of slee	pona (given nig	ht, I nee	ed to cate	ch up on	the nex	t day by	nappin	g or on the next night by
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
3. I am concerned tha	t chronic insor	nnia may	have se	rious con	sequen	ces on m	ny physic	al healt	h.		
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
4. I am worried that I	may lose cont	rol over m	y ability	to sleep).						
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
5. After a poor nights	sleep, I know	that it wil	l interfe	re with r	ny daily	activitie	s on the	next da	y.		
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
6. In order to be alert	and function	well durine	g the da	ıy, I am b	etter of	f taking	a sleepir	ıg pill rat	ther than	ı havinç	g a poor night's sleep.
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
7. When I feel irritated	l, depressed, c	or anxious	during t	the day, i	t is mos	stly beca	use I did	not slee	ep well ti	he nigh	t before.
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
8. When I sleep poorly	on one night,	I know it	will dis	turb my	sleep so	hedule f	or the w	hole we	ek.		
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
9. Without an adequa	te night's sleej	o, I can ha	rdly fun	ction the	next da	ay.					
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
10. I can't ever predict	whether I'll ha	ave a good	l night's	sleep.							
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
11. I have little ability t	o manage the	negative o	onsequ	ences of	disturb	ed sleep).				
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
12. When I feel tired, f night before		, or just se	eem not	to funct	ion wel	l during	the day, i	t is gen	erally be	cause I	did not sleep well the
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
13. I believe insomnia	is essentially t	he result	of a che	mical im	balance	<u>.</u>					
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
14. I feel insomnia is r	uining my abili	ty to enjo	y life an	d preven	ts me fi	rom doin	g what I	want.			
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
15. A "nightcap" before	e bedtime is a	good solu	ition to	sleepless	sness.						
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree
16. It usually shows in	my physical a	ppearance	when I	haven't	slept we	ell.					
Strongly Di	sagree 1	2	3	4	5	6	7	8	9	10	Strongly Agree

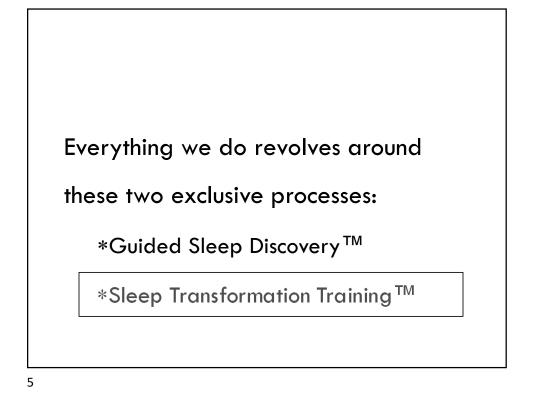
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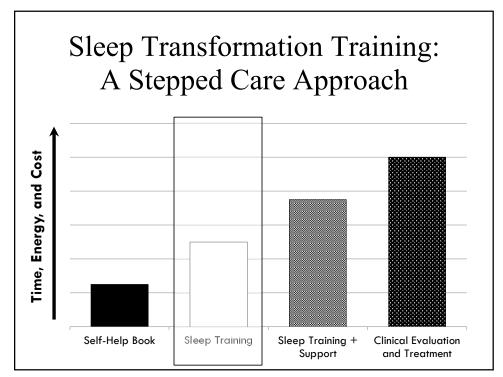
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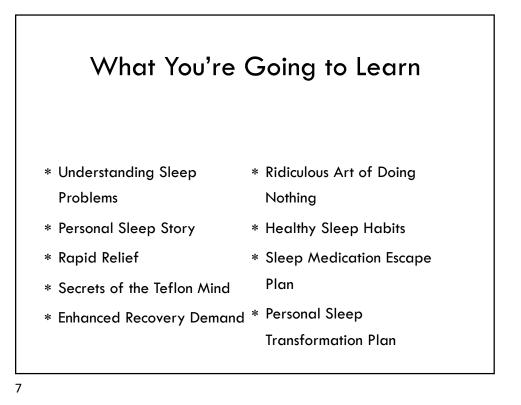


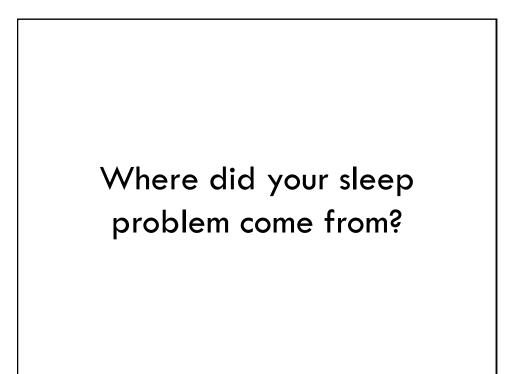
Robert N. Glidewell, PsyD, CBSM Ex-Insomniac Founder and Clinical Director Licensed Psychologist Behavioral Sleep Specialist Scientist-Practitioner Author



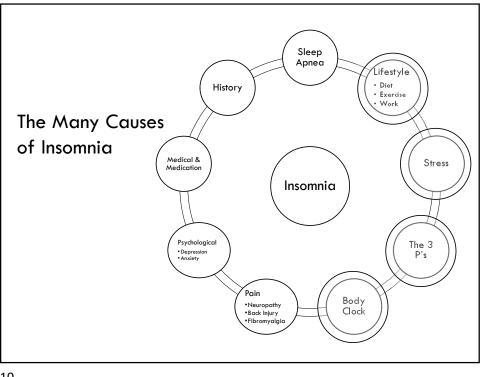




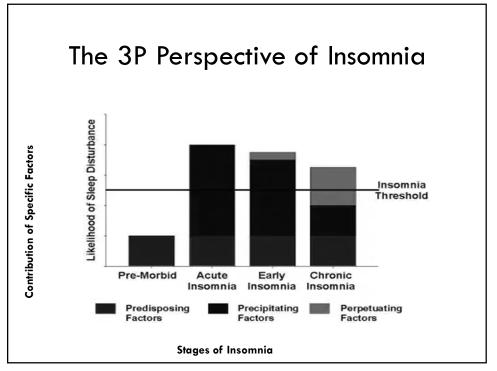


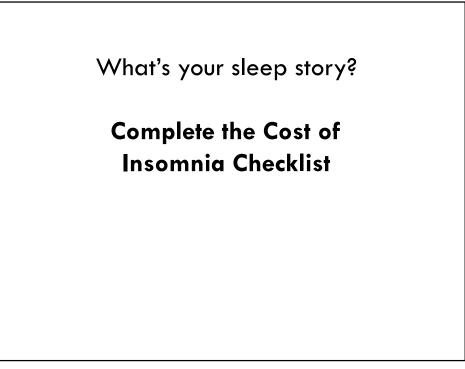


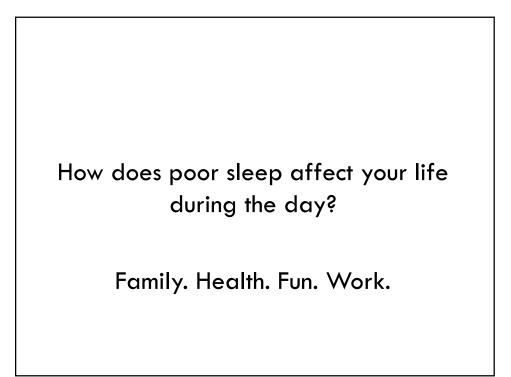
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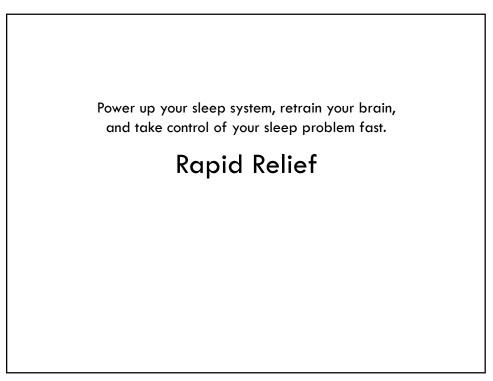




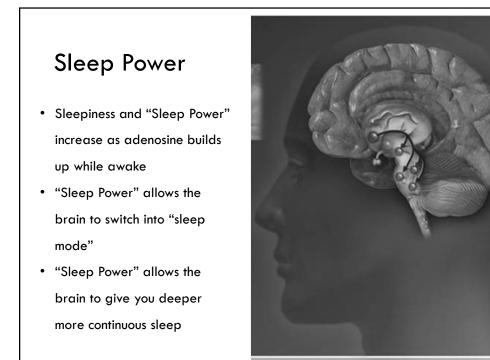


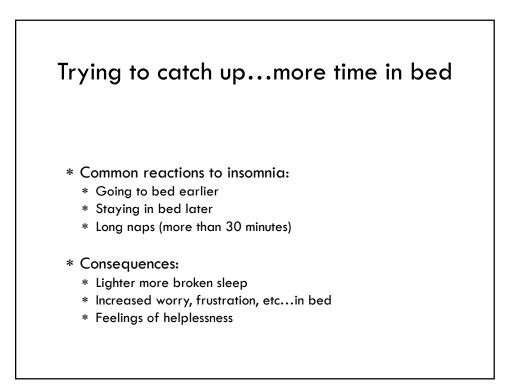
When I'm sleeping great I am...

When I wake up well rested every day I will...



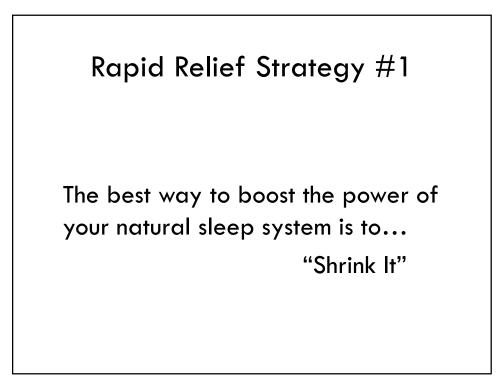
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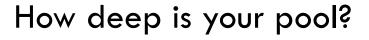




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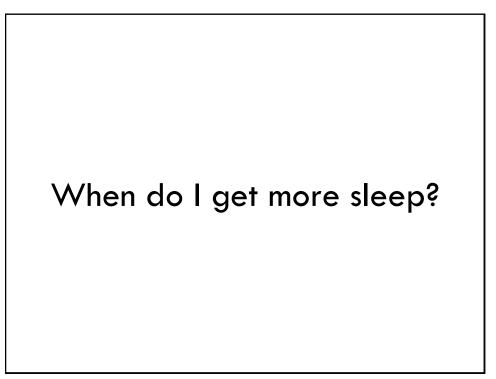


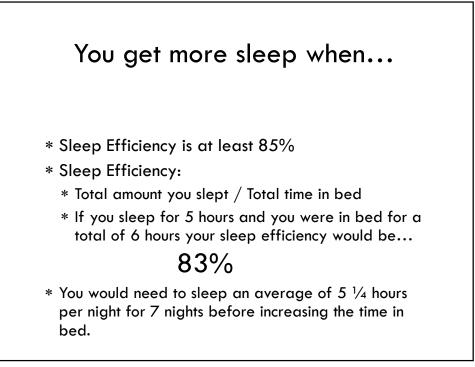


Shrink It!	
* Estimate Your Total Sleep Time:	5.5 hours
* Choose Your Time-In-Bed:* Total Sleep Time + 30 min.	6 hours
* Choose Your Out-Of Bed Time:* Calculate Bed Time:	7:00 AM
* 7:00 AM minus 6 hours =	1:00 AM
14-Day Sleep Schedule:	
Bed Time: 1:00 AM Out-Of-Bed Time: 7:00 AM	

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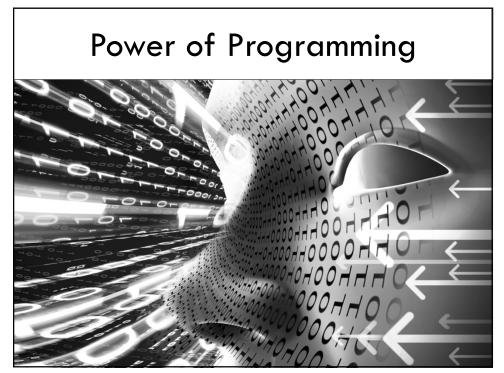


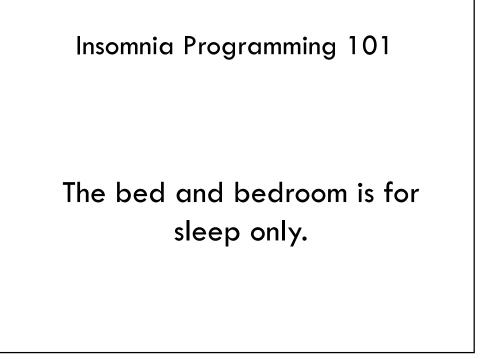
	Use a Sleep Diary								
	Consensu: Sample	s Sleep Diary (Core Items Onl	hy)	ID/Name:				
Today's date	4/5/08								
1. What time did you get into bed?	10:15 p.m.								
 What time did you try to go to sleep? 	11:30 p.m.								
 How long did it take you to fall asleep? 	1 hour 15 min.								
4. How many times did you wake up, not counting your final awakening?	3 times								
 In total, how long did these awakenings last? 	1 bour 10 min.								
6. What time was your final awakening?	6:35 a.m.								
7. What time did you get out of bed for the day?	7:20 a.m.								
 How would you rate the quality of your sleep? 	o Very poor el Poor o Fair o Good o Very good	 b Very poor b Poor b Fair b Good b Very good 	 b Very poor b Poor b Fair b Good b Very good 	o Very poor ePoor o Fair o Good o Very good	b Very poor bPoor b Fair b Good b Very good	 ▷ Very poor ▷Poor ▷ Fair ▷ Good ▷ Very good 	 b Very poor bPoor b Fair b Good b Very good 	a Very poor aP00r a Fair a Good a Very good	
9. Comments (f applicable)	I have a cold								

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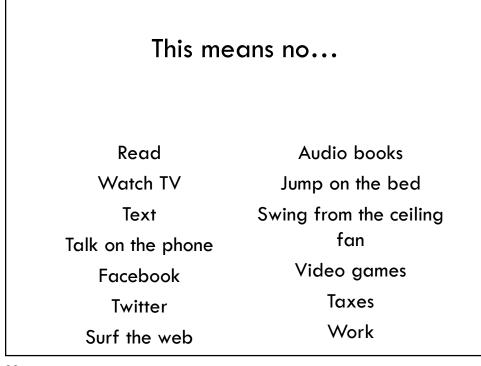


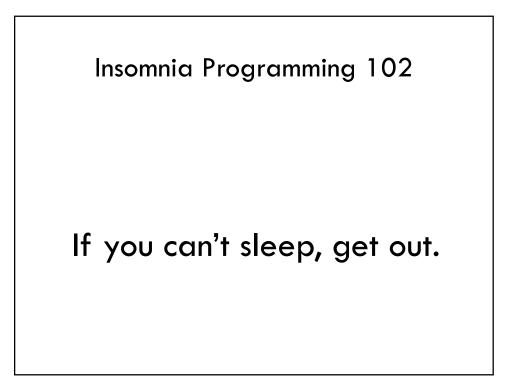
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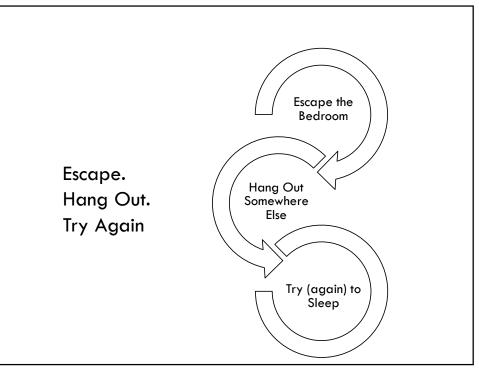


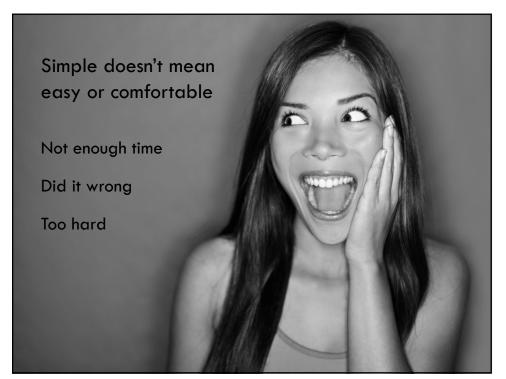




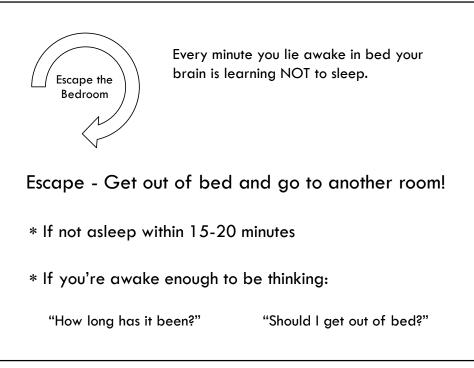


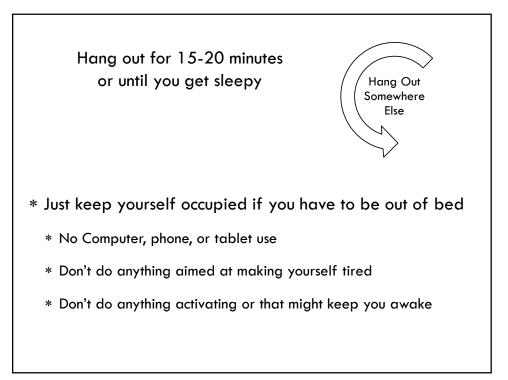




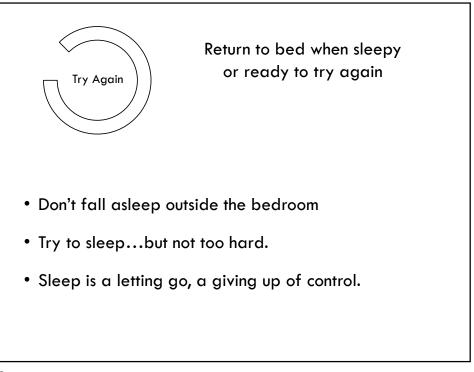


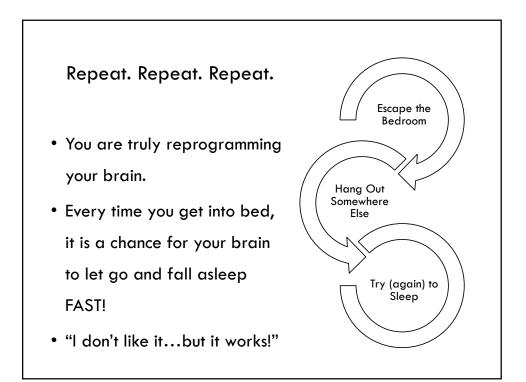
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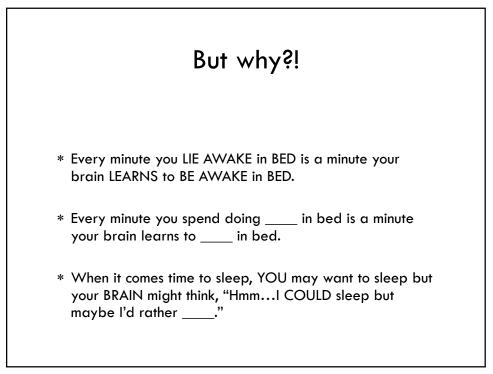
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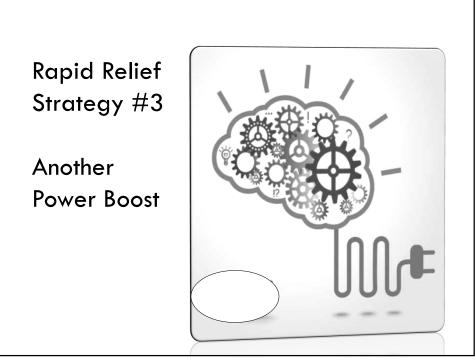


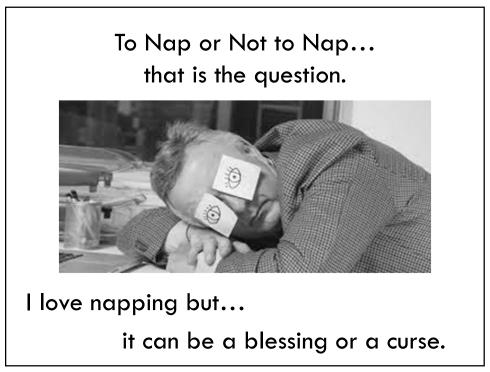
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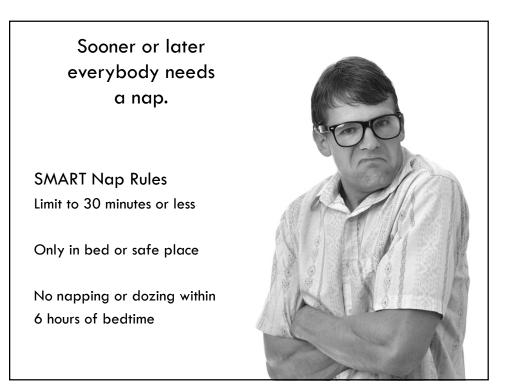
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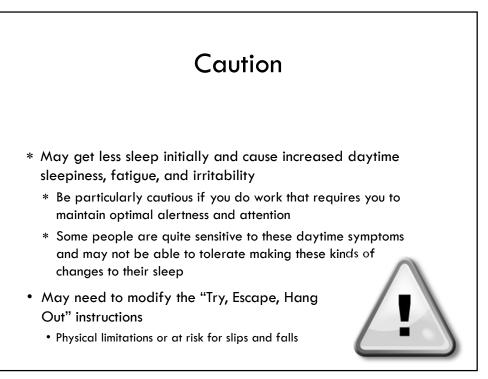


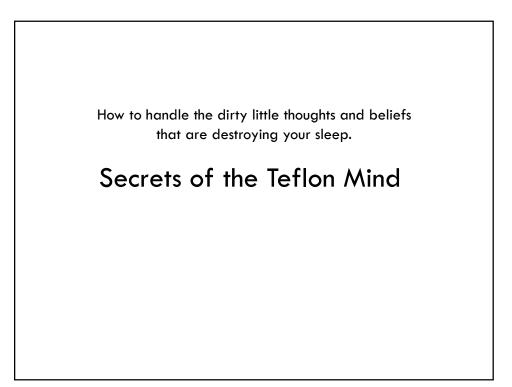
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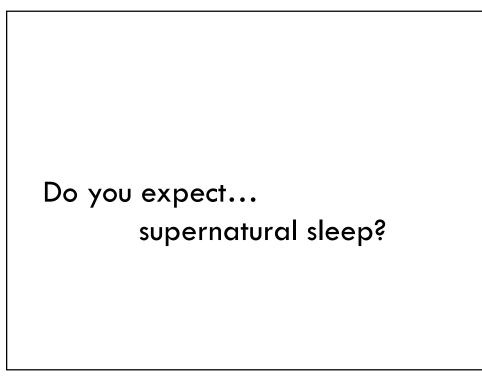
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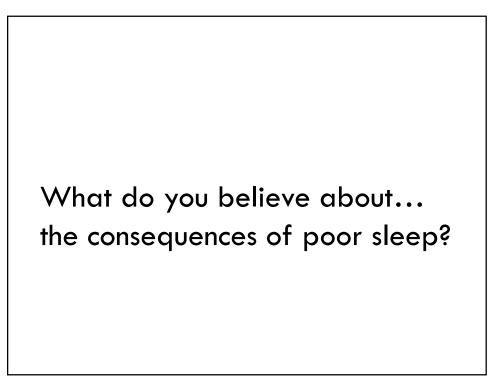


Identify. Challenge. Rethink.

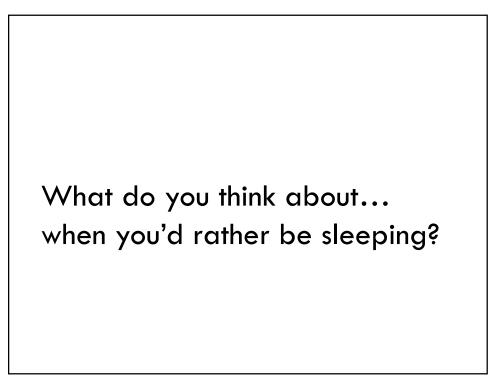
Complete the Dysfunctional Beliefs and Attitudes About Sleep Questionnaire



What do you believe... causes of poor sleep?

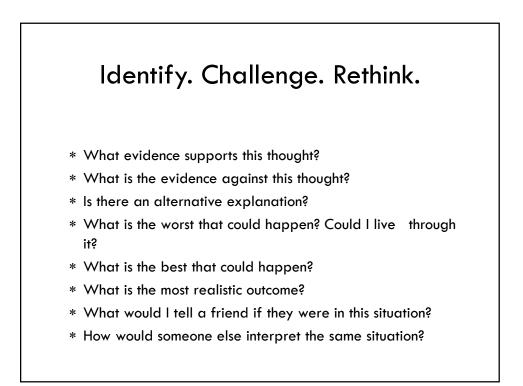


What do you believe... fixes poor sleep?



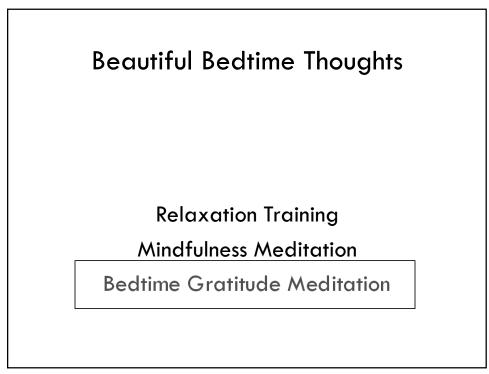
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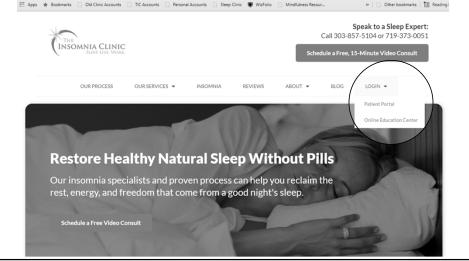


Identify. Challenge. Rethink.

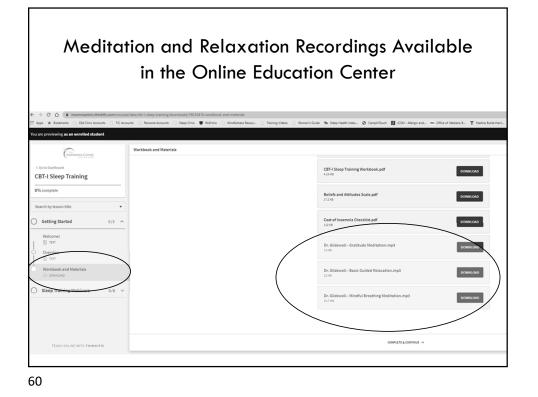
What are the alternative (more true or helpful) thoughts and beliefs?

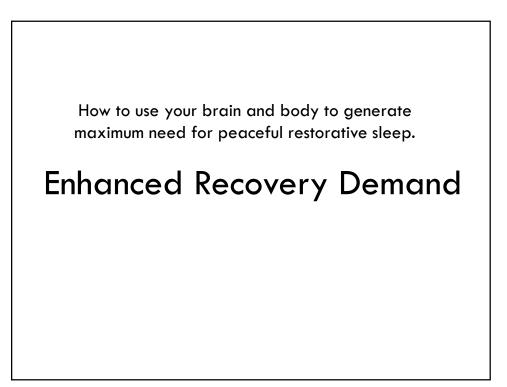












Sleep should...

Restore Energy Replenish Supplies

Repair Body & Brain

Remove Waste

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Must use body & brain in a way that...

Depletes Energy

Consumes Supplies

Damages Body &

Brain

Creates Waste

Doing the same old things, in the same old way, does not do this.



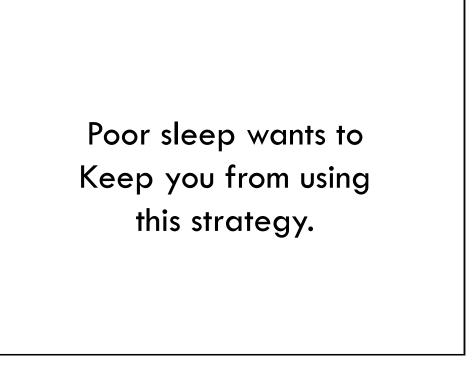
Build a need for body recovery

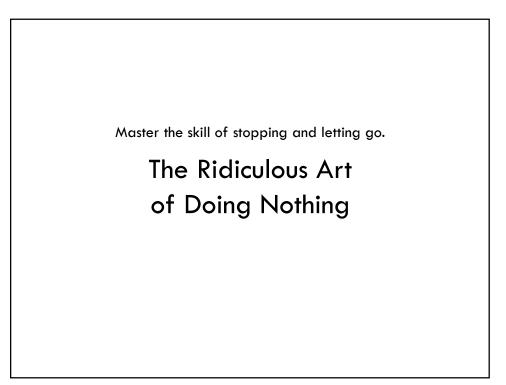
Learn a new physical activity

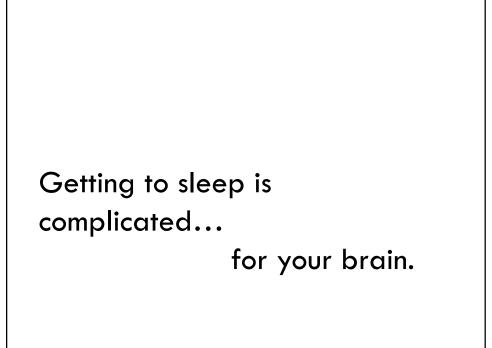
Push body slightly beyond current physical limits

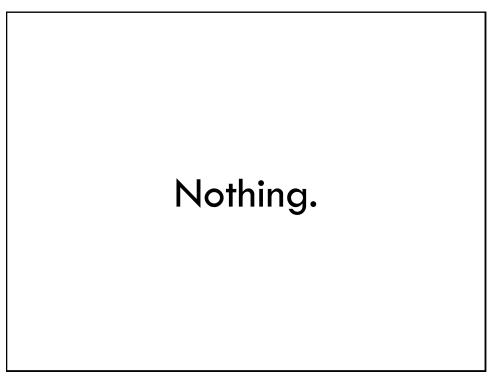
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Build a need for brain recovery Constant curiosity New problems to solve New people and places Puzzles, puzzles, puzzles



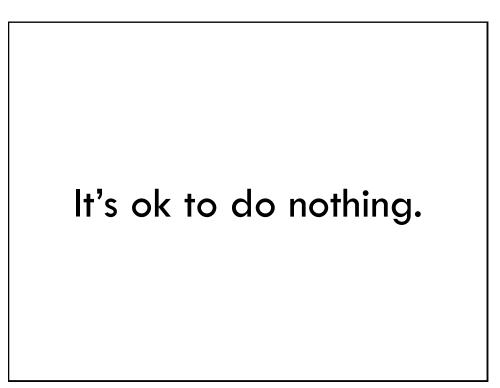


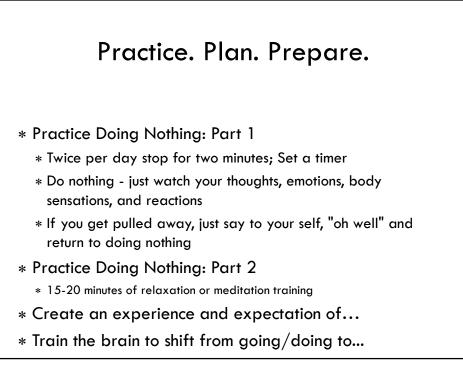




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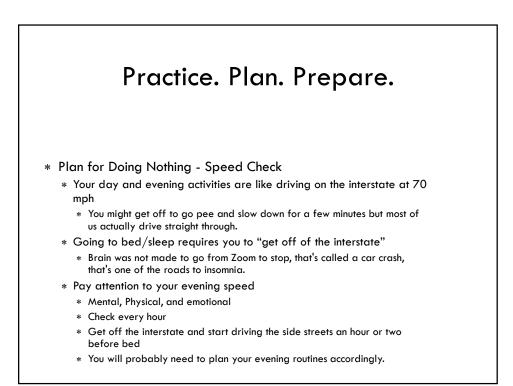
Doing nothing is easy right?



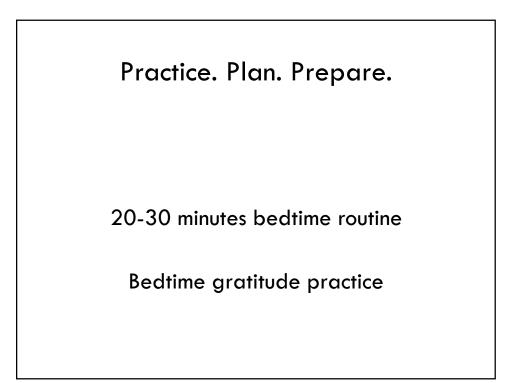






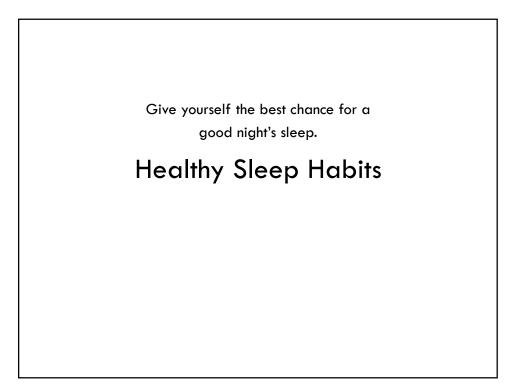




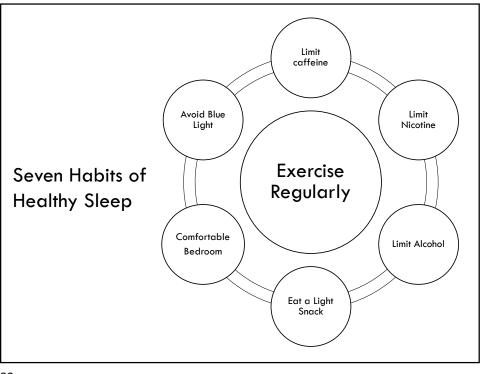


A few more thoughts about doing nothing

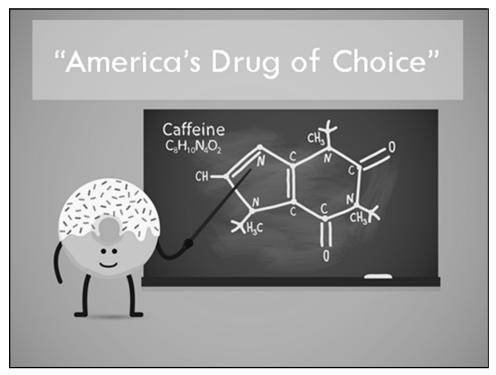
- * There is an intentional process. There are things you can DO, but they all pretty much happen before you ever get near the bed.
- * Once you get in bed, as long as there is not sleep disorder, the stage is set and you just need to get out of the way.
- * You may ask what about things like counting sheep, visualization, relaxation, etc...
 - * These are basically just distraction techniques to help you get out of the way when you have not practiced, planned, and prepared for doing nothing



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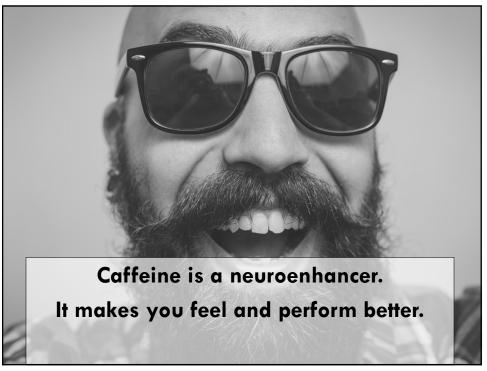


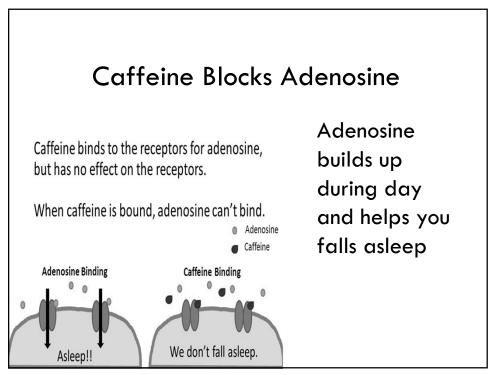






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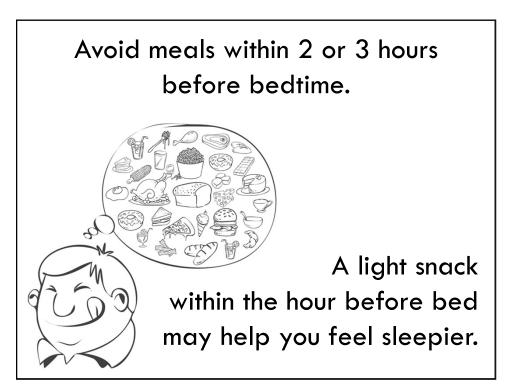






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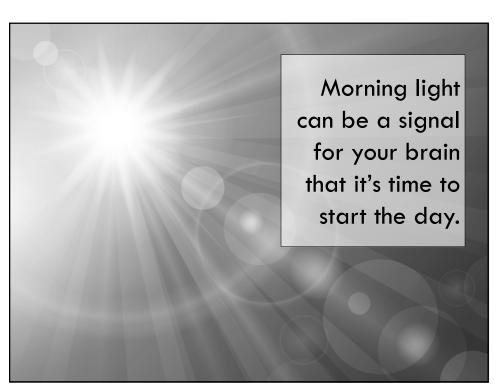


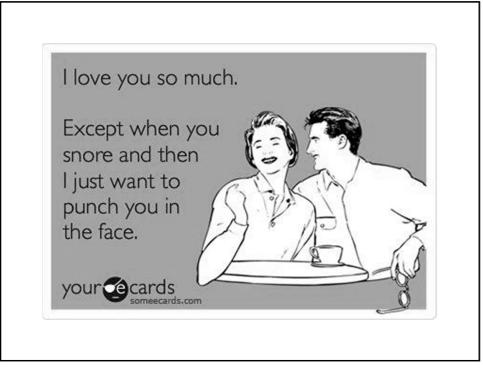
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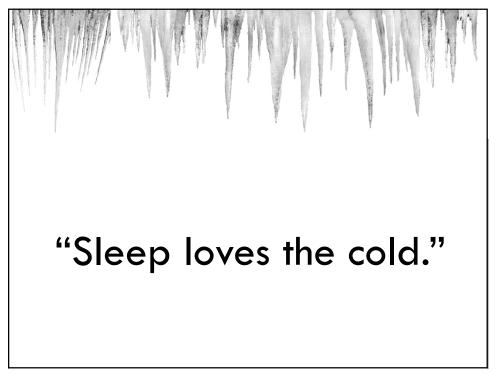




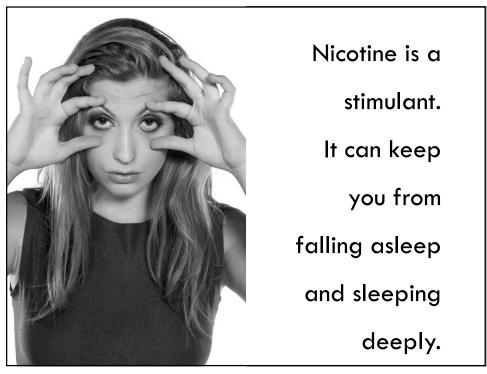


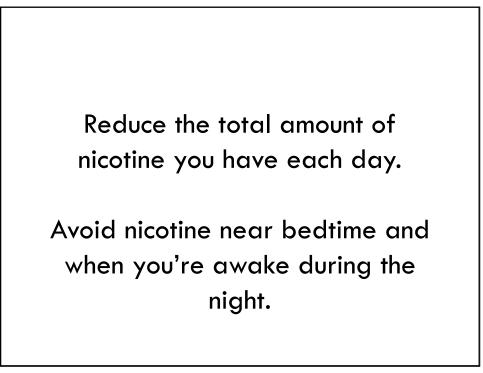






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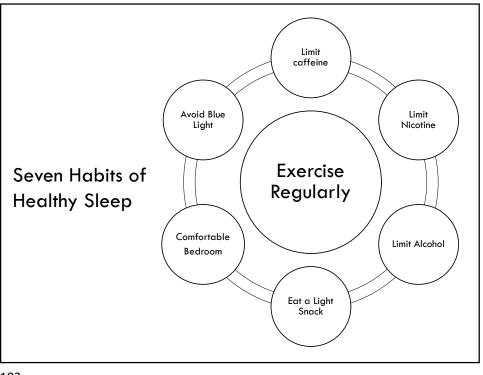


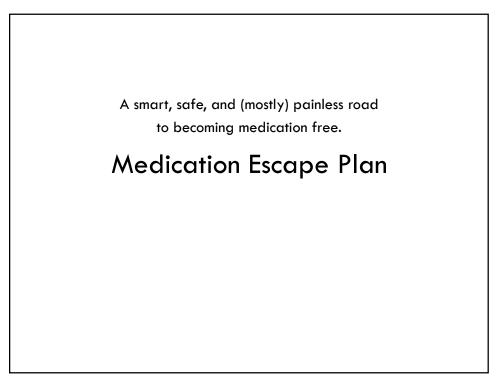




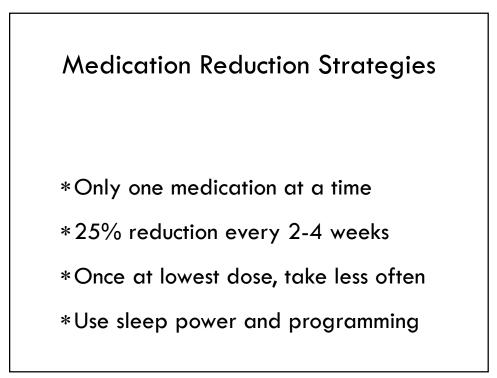


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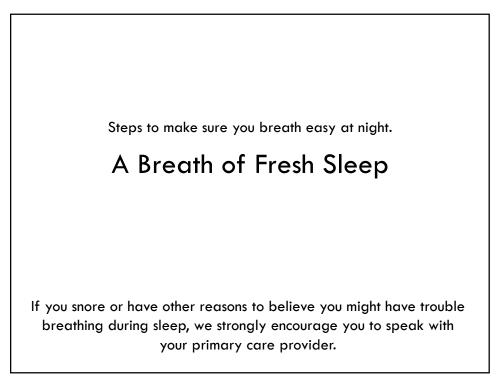


Sleep medications are psychologically and physically addictive.

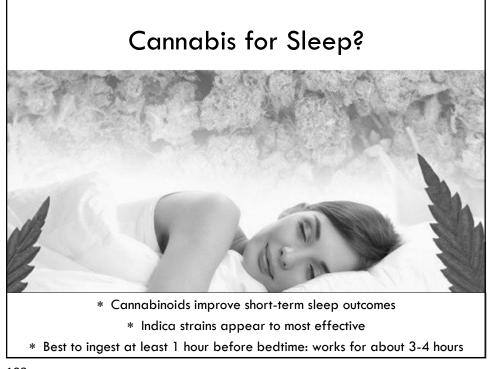


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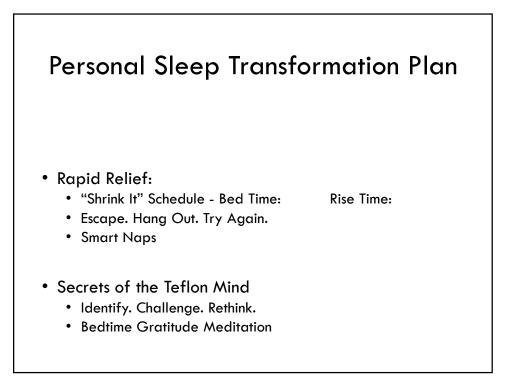


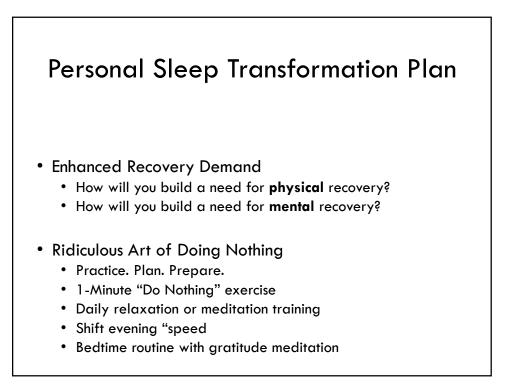


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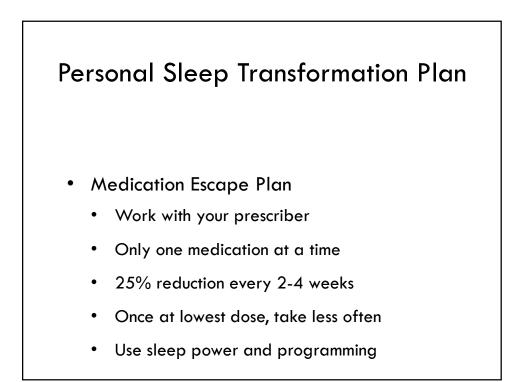


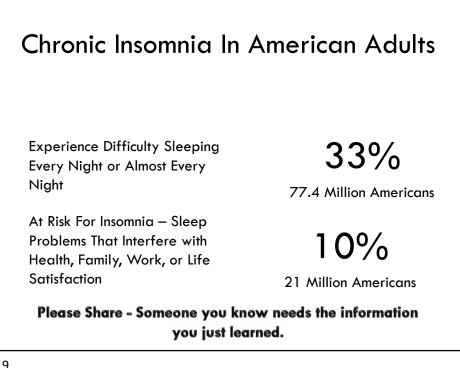




Personal Sleep Transformation Plan

- Healthy Sleep Habits
 - Screens
 - Caffeine
 - Alcohol
 - Nicotine
 - Food
 - Exercise
 - Comfortable Bed and Bedroom
 - Dark, cool, quiet, relaxing, and pet free









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