

Case Conceptualization Form

Domains	Target	Resolution
<p>1. Sleep Drive: Are there any factors weakening the sleep drive? N.B. Low sleep drive can interfere with sleep onset and continuity as well as sleep depth/quality.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Time-in-bed is 30 minutes greater than average total sleep time? <input type="checkbox"/> Any evidence of dozing? <input type="checkbox"/> Any evidence of napping? <input type="checkbox"/> Any substances that block sleep drive (e.g., caffeine)? <input type="checkbox"/> Evidence of decreased physical activity in a 24-hour period? <input type="checkbox"/> Lingered in bed greater than 30 minutes post-wake in the morning? 	
<p>2. Biological clock: Are there factors weakening the signal from the biological clock? N.B. Without regular habits congruent with one's chronotype, there will be weak alerting signals (e.g., fatigue) and social jetlag (e.g., sleep and mood problems).</p>	<ul style="list-style-type: none"> <input type="checkbox"/> An hour or more variability in rise time <input type="checkbox"/> An hour or more variability in rise time <input type="checkbox"/> Are they a night owl keeping an early bird's schedule, or reverse? 	
<p>3. Arousal: Any evidence of hyperarousal? Any behaviors engaged to "produce sleep" (i.e., sleep effort)? N.B. Sleep effort is related to and perpetuates anxiety—a state incongruous with sleep. Additionally, pairing wakefulness or negative activities with the bed will produce conditioned arousal.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Are there rituals to produce sleep even though sleep continues to be bad, e.g., no alarm clock, sleeping separate from bed partner, knockout shades, white noise machine/masks, tv or reading in bed...? <input type="checkbox"/> Are they worried about sleep? <input type="checkbox"/> Are they worried about other things (in bed)? <input type="checkbox"/> Are they wide awake upon getting into bed? <input type="checkbox"/> Do they stay in bed when awake? <input type="checkbox"/> Do they feel frustrated/anxious/distressed while awake in bed? 	

<p>1. <u>Unhealthy sleep behaviors:</u> What unhealthy sleep behaviors are present? Consider amount and timing, etc.).</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Excessive or late caffeine? <input type="checkbox"/> Alcohol? <input type="checkbox"/> Marijuana? <input type="checkbox"/> Short-acting sleeping pills? <input type="checkbox"/> Nocturnal eating? <input type="checkbox"/> Vigorous evening exercise? 	
<p>2. <u>Medications:</u> What medications might impact the patient's sleep/sleepiness? Consider carryover effects, tolerance, and psychological dependence.</p>		
<p>3. <u>Comorbidities:</u> What comorbidities impact the patient's sleep and how? Consider sleep, medical and psychiatric conditions. (e.g., difficult adjustment to CPAP treatment for sleep apnea, pain, PTSD-related hypervigilance).</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Sleep apnea, if yes, is it adequately treated? <input type="checkbox"/> Restless Leg Syndrome, if yes, is it adequately treated? <input type="checkbox"/> Periodic Limb Movement, if yes, is it adequately treated? <input type="checkbox"/> Chronic pain, if yes, is it adequately treated? <input type="checkbox"/> Comorbid psychiatric disorder, if yes, is it adequately treated? Affects sleep? Others? 	
<p>4. <u>Other:</u> Consider sleep environment, care taking duties at night, life phase sleep issues; mental status, and readiness for change.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Sleep environment optimal? <input type="checkbox"/> Care taking or on-call duties at night? <input type="checkbox"/> Cognitive or learning issues? <input type="checkbox"/> What stage of readiness for change? <input type="checkbox"/> Any resistance to engaging in short-term behavior changes? 	

Notes: