

## Sleep Problems Survey

*The purpose of this survey is to evaluate current community practices related to clinical assessment and treatment of sleep problems.*

*Firstly, we would like some information about you and where you practice.*

1) How many years have you been in practice?

- still in training
- 1-5
- 6-10
- 10-15
- 15+

2) Practice location (select all that apply)

- academic outpatient clinic
- academic hospital inpatient
- private hospital inpatient
- private outpatient clinic
- community mental health clinic
- residential facility
- PHP/IOP
- other: \_\_\_\_\_

*Now, we would like to know about your practice with regard to assessment of sleep problems.*

3) Do you assess for sleep problems in all your patients?

- Yes
- No

4) How often do you assess for sleep problems in your patients?

- every appointment
- every 6 months
- every year
- never
- other: \_\_\_\_\_

5) How confident are you in your abilities to assess for sleep problems in your patients? (Rate on a scale of 1-5.)

- 1 (Poor)
- 2
- 3

- 4
- 5 (Excellent)

6) How do you assess for sleep problems in your patients?

- as part of clinical interview
- review of systems form
- specific sleep questionnaire
- only if patient reports sleep problems
- other: \_\_\_\_\_

7) What do you think is the biggest barrier to routinely assessing for sleep problems in your patients?

- limited time
- difficulty obtaining accurate information
- lack of effective treatments
- lack of knowledge about recommended treatments
- other: \_\_\_\_\_

*Finally, we would like to know about your practice with regard to treatment of sleep problems.*

8) Please rank the items below in descending order of importance (1 is very important, 6 is the least important) to your personal approach to treating sleep problems.

- \*if more than one approach at the same time, please rank each choice with the same number
- \*if a choice is not part of your approach, please leave blank

- \_\_\_ sleep hygiene
- \_\_\_ alpha-2 agonists (e.g., clonidine)
- \_\_\_ OTC supplement (e.g., melatonin or valerian)
- \_\_\_ atypical antipsychotics (e.g., quetiapine)
- \_\_\_ sedatives/hypnotics (e.g., clonazepam or zolpidem)
- \_\_\_ sedating antidepressants (e.g., trazodone or mirtazapine)
- \_\_\_ other (please specify) \_\_\_\_\_

9) What do you feel is the biggest barrier to using sleep hygiene as a first-line treatment for sleep problems?

- takes too much time to discuss
- lack of knowledge about sleep hygiene
- anticipated patient/guardian compliance with recommendations
- patient/guardian preference for medications
- Other: \_\_\_\_\_

*Thank you for participating in this survey. If you have any questions, comments, or suggestions please contact Ali Anwar at [s.anwar@wustl.edu](mailto:s.anwar@wustl.edu).*