

Insomnia

Preparing for Help With Ongoing Sleep Difficulty

Adults | 10 to 15 minutes

Ongoing difficulty falling asleep, staying asleep, or returning to sleep can become a source of pressure. More effort or stricter rules may not answer the problem. Use this page to describe your experience and prepare questions for qualified care.

Use rough observations from a recent period. Avoid repeated clock checking or changing medication, sleep opportunity, or prescribed care on your own.

Describe the pattern and impact

Note what the difficulty is like, available sleep opportunity, and daytime effects. Include pain, breathing concerns, schedule changes, or medication questions that may be relevant.

Ask about individualized care

Ask what evaluation is appropriate and whether a structured treatment such as CBT-I fits your situation. Clarify how the plan accounts for work, caregiving, health conditions, and access.

1. What sleep difficulty has been recurring?**2. What daytime effect or safety issue matters most?****3. What circumstances or health questions should my clinician consider?****4. What would I like to understand about treatment options and follow-up?****Clinical use and adaptation**

Do not diagnose insomnia from this sheet or prescribe sleep restriction, stimulus-control rules, medication, or light therapy. Consider other sleep and health conditions. Significant daytime sleepiness or alarming symptoms require appropriate safety planning and assessment.