# Pittsburg Insomnia Rating Scale (PIRS-20)

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1. Please enter the client's i	nformation:		
Client First Name:	Client Last Name:	Client DOB:	

2. The following questions ask about your sleep in the past 7 days and night. Please mark the one best answer for each questions.

A. In the past, how much were bothered by:	Not at all bothered	Slightly bothered	Moderately bothered	Severely bothered
1. One or more awakenings after getting to sleep.				
2. Not getting enough sleep.				
3. Sleep that doesn't fully refresh you				
4. Poor alertness during the daytime				
5. Difficulty keeping your thoughts focused				
6. Others noticing you appeared tired or fatigued				
7. Too many difficulties to overcome				
8. Bad mood(s) because you had poor sleep				
9. Lack of energy because of poor sleep				
10. Poor sleep that interferes with your relationship				
11. Being unable to sleep				
12. Being able to do only enough to get by				

### 3. B. Please mark the best answer for each question about the past week:

	0	1	2	3
13. From the time you tried to go to sleep, how long did it take to fall asleep on most nights?	Less than 1/2 hour	Between 1/2 to 1 hour	Between 1 to 3 hours	More than 3 hours or I didn't sleep
14. If you woke up during the night, how long did it take to fall back to sleep on most nights?	Less than 1/2 hour or I didn't wake up	Between 1/2 to 1 hour	Between 1 to 3 hours	More than 3 hours or I didn't fall back to sleep
15. Not counting times when you were in bed, how many hours of actual sleep did you get during the worst night?	More than 7 hours	Between 4 to 7 hours	Between 2 to 4 hours	Less than 2 hours or I didn't sleep
16. On how many days did you have trouble coping because of poor sleep?	None or 1 day	On 2 or 3 days	On 4 or 5 days	On 6 or all days

#### 4. C. Over the past week, how would you rate:

	Excellent	Good	Fair	Poor
17. Your sleep quality, compared to most people				
18. Your satisfaction with your sleep				
19. The regularity of your sleep				
20. The soundness of your sleep				

## Scoring and Source Office Use Only):

### Scoring:

Total Score of Q1through Q20.

One missing item is allowed. Pro-rate if missing one item...i.e. (sum/count)\*20.

- Minimum Score = 0 (good)
- Maximum Score = 60 (bad)

#### Source:

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