## Warning Signs Rating Sheet: Month of \_\_\_\_\_

Each day, rate the severity of your warning signs *severe*, *moderate*, *mild or not present*. Try to complete this questionnaire every night at the same time.

| 1  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|--|---|---|---|---|-----|---|---|---|---|----|----|----|----|-----|-----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
|  | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Severe   | 1 | 2 | J | 4 |     | 0 |   | 0 |   | 10 | 11 | 12 | 13 | 14  | 13  | 10 | 17 | 10 | 19 | 20 | 21 | 22 | 23 | 24 | 23 | 20 | 21 | 26 | 29 | 30 | 31 |
| Moderate                                       |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Mild   |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Not<br>Present                                 |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 2  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 2  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   | _ | 2 |   | l - |   | - |   |   | 10 | 11 | 10 | 12 | 1.4 | 1.5 | 16 | 17 | 10 | 10 | 20 | 21 | 22 | 22 | 24 | 25 | 26 | 27 | 20 | 20 | 20 | 21 |
| a  | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Severe   | - |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Moderate                                       |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Mild   |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Not<br>Present                                 |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 3  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|  |   |   |   |   | T _ |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    | _  |    |    |    |
| _  | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Severe   | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate                                       | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate<br>Mild                               | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate<br>Mild<br>Not                        | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate<br>Mild                               | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate<br>Mild<br>Not<br>Present             | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate<br>Mild<br>Not                        | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate<br>Mild<br>Not<br>Present             | 1 |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Moderate<br>Mild<br>Not<br>Present             | 1 | 2 | 3 | 4 | 5   | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14  | 15  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Moderate<br>Mild<br>Not<br>Present             |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Moderate Mild Not Present                      |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Moderate Mild Not Present  4                   |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| Moderate Mild Not Present  4.  Severe Moderate |   |   |   |   |     |   |   |   |   |    |    |    |    |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |