SYNTHETIC EXAMPLE

ESS

ESS - synthetic example

CLIENT	ADMINISTERED	RESPONSE MODE
John Doe	**Example date**	**Self-report**

TOTAL

20 / 24

DEMO SYNTHETIC



20/24

What this report lays out

- Source instrument: ESS
- Item count: 8 items
- Response format: would never doze, slight chance of dozing, moderate chance of dozing, high chance of dozing
- Respondent: Patient

CLINICIAN REVIEW REQUIRED

This document demonstrates Lirena's report design using fictional data. It does not represent a scored ESS result, cannot establish a diagnosis, and must not be placed in a clinical record.

The ESS supports clinician review and is not a diagnosis. Every situation must be rated; an ESS with a missing item is invalid.

A report designed for clinical review

Synthetic ESS example. The gauges and rows use this instrument's groups and range. They are not a client record.

REVIEW

Respondents rate their usual chance of dozing in eight everyday situations, from 0 (would never doze) to 3 (high chance of dozing), thinking about their usual way of life in recent times. Every situation must be answered.

CONTEXT

The ESS score is the sum of the eight situation ratings, 0 to 24. Scores of 11 to 24 represent increasing levels of excessive daytime sleepiness (Johns). The result supports clinician review and is not a diagnosis.

BOUNDARY

The ESS supports clinician review and is not a diagnosis. Every situation must be rated; an ESS with a missing item is invalid.

REPORT PRINCIPLE

Show the evidence, the version, and the boundary. Leave diagnosis and formulation with the clinician.

ESS response pattern

Synthetic responses for ESS. The table uses this instrument's groups and range. It is not a client record and does not reproduce official item wording.

ITEM	GROUP	SYNTHETIC RESPONSE
1	Total	would never doze
2	Total	slight chance of dozing
3	Total	moderate chance of dozing
4	Total	high chance of dozing
5	Total	would never doze
6	Total	slight chance of dozing
7	Total	moderate chance of dozing
8	Total	high chance of dozing

Synthetic ESS values only. Not a client record.

Source-led by design

Lirena separates published methodology, product implementation, and clinical approval. A citation does not by itself authorize administration or prove a software scoring rule.

INSTRUMENT

The ESS, developed by Murray Johns, is a compact self-report of typical daytime sleepiness. Clinics use it as sleep-intake context. A high or low result is not a diagnosis of sleep apnoea, narcolepsy, or any other sleep disorder.

ADMINISTRATION

Respondents rate their usual chance of dozing in eight everyday situations, from 0 (would never doze) to 3 (high chance of dozing), thinking about their usual way of life in recent times. Every situation must be answered.

CLINICAL BOUNDARY

The ESS supports clinician review and is not a diagnosis. Every situation must be rated; an ESS with a missing item is invalid.

METHODOLOGY

The ESS score is the sum of the eight situation ratings, 0 to 24. Scores of 11 to 24 represent increasing levels of excessive daytime sleepiness (Johns). The result supports clinician review and is not a diagnosis.

SELECTED REFERENCES

1. Original ESS paper

Johns MW. A new method for measuring daytime sleepiness: the Epworth Sleepiness Scale. Sleep. 1991;14(6):540-545.

2. Official ESS information

Johns MW. Epworth Sleepiness Scale.

3. Scoring source Lirena follows

Source URL recorded on the Lirena scoring verification input.