SYNTHETIC EXAMPLE

PSQI

PSQI - synthetic example

CLIENT
John Doe

ADMINISTERED
Example date

RESPONSE MODE
Self-report

SUBJECTIVE SLEEP QUALITY

1 / 3

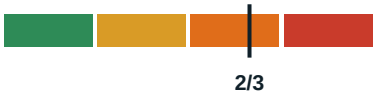
DEMO SYNTHETIC



SLEEP LATENCY

2 / 3

DEMO SYNTHETIC



SLEEP DURATION

0 / 3

DEMO SYNTHETIC



What this report lays out

- Source instrument: PSQI
- Item count: 26 items
- Response format: Varies by item
- Respondent: Patient

CLINICIAN REVIEW REQUIRED

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

PSQI reports the component scores, the total, and the published quality association. It does not diagnose a sleep disorder.

A report designed for clinical review

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

REVIEW

The respondent answers the past-month sleep questions. Partner items are asked only when a bed partner or room mate is reported, and they are not in the total.

CONTEXT

Lirena uses this rule. Score range: 021. Seven component scores summed. A total below 5 is associated with good sleep quality, a total above 5 with poor sleep quality, and a total of 5 meets neither. Partner items are not in the total. PSQI reports the component scores, the total, and the published quality association. It does not diagnose a sleep disorder. Item groups: Subjective sleep quality (membership on the scoring rule, 0 to 3); Sleep latency (membership on the scoring rule, 0 to 3); Sleep duration (membership on the scoring rule, 0 to 3); Habitual sleep efficiency (membership on the scoring rule, 0 to 3); Sleep disturbances (membership on the scoring rule, 0 to 3); Use of sleeping medication (membership on the scoring rule, 0 to 3); Daytime dysfunction (membership on the scoring rule, 0 to 3). 8 items are recorded for clinician review and not included in the total. Cutoff not implemented in Lirena.

BOUNDARY

PSQI reports the component scores, the total, and the published quality association. It does not diagnose a sleep disorder.

REPORT PRINCIPLE

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

PSQI response pattern

Synthetic responses for PSQI. 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	Subjective sleep quality	Synthetic response
2	Sleep latency	Synthetic response
3	Sleep duration	Synthetic response
4	Subjective sleep quality	Synthetic response
5	Sleep latency	Synthetic response
6	Sleep duration	Synthetic response
7	Subjective sleep quality	Synthetic response
8	Sleep latency	Synthetic response
9	Sleep duration	Synthetic response
10	Subjective sleep quality	Synthetic response
11	Sleep latency	Synthetic response
12	Sleep duration	Synthetic response
13	Subjective sleep quality	Synthetic response
14	Sleep latency	Synthetic response
15	Sleep duration	Synthetic response
16	Subjective sleep quality	Synthetic response

Synthetic PSQI 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 PSQI covers several sleep-quality domains rather than a single dozing question. Clinics use it to organise sleep-history collection. It does not replace a sleep study, insomnia diagnosis, or medical review.

ADMINISTRATION

The respondent answers the past-month sleep questions. Partner items are asked only when a bed partner or room mate is reported, and they are not in the total.

CLINICAL BOUNDARY

PSQI reports the component scores, the total, and the published quality association. It does not diagnose a sleep disorder.

METHODOLOGY

Lirena uses this rule. Score range: 021. Seven component scores summed. A total below 5 is associated with good sleep quality, a total above 5 with poor sleep quality, and a total of 5 meets neither. Partner items are not in the total. PSQI reports the component scores, the total, and the published quality association. It does not diagnose a sleep disorder. Item groups: Subjective sleep quality (membership on the scoring rule, 0 to 3); Sleep latency (membership on the scoring rule, 0 to 3); Sleep duration (membership on the scoring rule, 0 to 3); Habitual sleep efficiency (membership on the scoring rule, 0 to 3); Sleep disturbances (membership on the scoring rule, 0 to 3); Use of sleeping medication (membership on the scoring rule, 0 to 3); Daytime dysfunction (membership on the scoring rule, 0 to 3). 8 items are recorded for clinician review and not included in the total. Cutoff not implemented in Lirena.

SELECTED REFERENCES

1. Original PSQI paper

Buysse DJ et al. The Pittsburgh Sleep Quality Index. Psychiatry Research. 1989;28(2):193-213.

2. Scoring source Lirena follows

Source URL recorded on the Lirena scoring verification input.