Sleep Difficulty & Insomnia

Patient: _____ Date: _____

STARTING TREATMENT PLAN

4–8 visits weekly

A preliminary care estimate—not an average time to heal or a guarantee.

WHAT TO EXPECT

Possible goals: easier sleep onset, fewer awakenings or improved daytime energy.

AFTER YOUR TREATMENT

Keep a consistent wake time; limit late caffeine. Ask about CBT-I for persistent insomnia.

WE WILL TRACK

Sleep diary, awakenings and daytime energy.

AFTER 2–4 TREATMENTS

We will review your response and daily function, then refine your timeline, visit frequency and next steps.

WHEN TO SEEK MEDICAL HELP

Loud snoring with gasping, severe sleepiness or suspected sleep apnea needs medical evaluation.

YOUR GOALS & FOLLOW-UP

Goal 1: _____

Goal 2: _____

Review at visit: Updated schedule: _____

Acupuncture supports care but does not replace medical diagnosis, essential treatment or emergency care. Results vary.