Insomnia Severity Index Documentation Cheat Sheet

Reviewed by the BastionGPT Clinical Advisory Board · August 2026 · Reproduces none of the ISI's items or forms

The Insomnia Severity Index is a seven-item self-report measure of perceived insomnia severity and impact, each item 0 to 4, total 0 to 28; bands 0 to 7, 8 to 14 subthreshold, 15 to 21 moderate, 22 to 28 severe. It measures perceived severity, never diagnoses, is copyright Charles Morin and distributed by Mapi, and is mandated by no payer. Defensible charting names the version and recall, states change against a named criterion, keeps the diary as a separate stream, and records the clinician's interpretation and plan.

Version: respondent, recall, language, mode one month standard; two weeks kept consistent
Do: patient / clinician / significant-other; recall interval; authorized language; paper, licensed portal, or interview; date.
Pitfall: "ISI administered" with no version; two-week and one-month results compared as identical.

Total out of 28, with its band labels, not diagnoses
Do: write x/28 and the band; 2011 case-finding cutoffs (10 community, 11 clinical) are screening findings; diagnosis by interview.
Pitfall: "ISI 19, moderate clinical insomnia" as the diagnosis; a band mapped to a treatment ladder.

Change against a named criterion 6 vs 8: different provenances
Do: baseline date and score, current, signed change; name the rule: 8-point-or-more = CBT-I trial response; below 8 = operational remission; 6-point MID estimate.
Pitfall: "clinically significant improvement" with no source; six and eight cited as one rule; the 2024 five-point figure applied to the standard total.

The diary, as a separate stream moderate convergence by design
Do: window and nights completed; TIB, TST, SOL, WASO, terminal wake, SE, regularity; say whether it agrees with the ISI.
Pitfall: "ISI improved, sleep normalized" with no diary; a real drop in distress dismissed because SE has not moved.

Interpretation and comorbid sleep disorders the AASM global summary
Do: what drove the score, daytime function, adherence, medications, mood; OSA testing, PAP, sleepiness, safety documented separately.
Pitfall: a bare total filed with a form; an ISI drop read as apnea control.

Treatment decision and relapse plan the number changes something
Do: sleep window, components, prescriber coordination, next administration on the same version; at completion, classification named plus relapse plan and recontact thresholds.
Pitfall: "cured" where the note should say "operational ISI remission."

The licence, and no items in the note direct access is not public domain
Do: obtained through the distributor and used under its terms; organizations, EHR builds, digital products, and public tools need a licence; result line only in the record.
Pitfall: the seven items retyped into a template or an unlicensed portal; a free calculator adopted because it was free.

Before the note is signed

- [ ] Respondent version, recall interval, language, and mode named
- [ ] Total written out of 28 with its band as a label
- [ ] Change stated with its sign against a named, sourced criterion
- [ ] Diary summarized separately; concordance or discordance stated
- [ ] Interpretation written; comorbid sleep disorders documented separately
- [ ] Decision recorded; next administration on the same version dated
- [ ] Instrument used under the distributor's terms; no items in the note

Drafting with AI

Give it the facts: version and recall, total, baseline and date, the criterion in use, diary summary, adherence, medications, comorbid sleep disorders, plan.

"Draft ISI documentation: patient version, two-week recall, 12/28; baseline 07/16 18/28; episode rule 8-point response and below-8 remission; diary SE 72%, TIB 45 min over window on 3 nights; hold sleep window; repeat at session 6."

Never paste patient-identifying information into consumer AI tools. BastionGPT is HIPAA-compliant with a signed BAA on every plan.

0 to 28
seven items scored 0 to 4

Bands = labels
0-7 / 8-14 / 15-21 / 22-28

8-point response, under 8 remission
trial conventions; 6-point MID separate

Copyright Morin, via Mapi
direct clinician access; licences for builds

Insomnia Severity Index Documentation Template

Copy or print for your practice · Adapt fields to your organization's, payer's and jurisdiction's documentation requirements. Contains no scale content.

Setting: | Patient (initials): | Date: | Clinician:

Version (respondent) + recall + language: | Time point + mode:

Score and band
Total ___/28 · band 0-7 / 8-14 subthreshold / 15-21 moderate / 22-28 severe (a scale label, not a diagnosis)

Change and criterion
Baseline date and score · signed change · criterion named: 8-point-or-more reduction (response) / current score below 8 (operational remission) / 6-point MID estimate · met or not met

Sleep diary summary
Window and nights completed · TIB · TST · SOL · WASO · terminal wake · SE % · schedule regularity · concordant or discordant with the ISI

Interpretation
What drove the score · daytime function · adherence to window and stimulus control · medications · mood · discordance examined · global summary

Diagnosis and comorbid sleep disorders
Insomnia disorder by interview · OSA testing and PAP status · sleepiness · safety · documented separately from the score

Plan
Sleep window · components · prescriber coordination · next administration (same version and recall) and date

Completion classification and relapse plan
Operational remission / response / neither, criterion named · residual symptoms · relapse-prevention instructions · recontact thresholds · licence held, no items in note

Clinician (name and credentials): | Signature: | Date: