

# DAILY PROGRESS CHART TO MONITOR

## RESTLESS LEG ACTIVITY (enter 1 checkmark for EACH incident)

DAY	Morning (wake up)	Morning				Afternoon				Evening				Bedtime	Middle of Night/ Early Morning			
Typical Day Previous to Program		✓						✓		✓	✓			✓	✓	✓		
DAY 1	✓							✓			✓			✓		✓		
DAY 2								✓			✓			✓		✓		
DAY 3	✓							✓						✓		✓		
DAY 4																✓		
DAY 5	✓							✓								✓		
DAY 6				✓												✓		
DAY 7											✓	✓						
DAY 8												✓						
DAY 9																		
DAY 10												✓						
DAY 11													✓					
DAY 12																		
DAY 13						✓						✓						
DAY 14																		
DAY 15												✓						
DAY 16						✓								✓				
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DAY 19																		
DAY 20												✓						
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DAY 23																✓		
DAY 24													✓					
DAY 25																		
DAY 26																		
DAY 27														✓				
DAY 28													✓					
DAY 29														✓				
DAY 30														✓				

