

# WEEK 1

## Baseline Condition Schedule

My Subject ID: \_\_\_\_\_

SATURDAY SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Parent/  
Guardian  
Fill out  
Baseline  
Demographic  
Information  
Survey

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

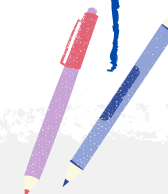
☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Parent/  
Guardian +  
Teen  
Baseline  
Office Visit!



# WEEK 2

## Experimental Condition 1 Schedule

My Subject ID: \_\_\_\_\_

SATURDAY      SUNDAY      MONDAY      TUESDAY      WEDNESDAY      THURSDAY      FRIDAY

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

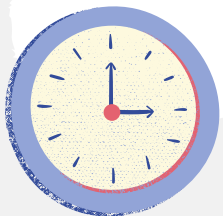
☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime



# WEEK 3

## Experimental Condition 1 Schedule

My Subject ID: \_\_\_\_\_

SATURDAY SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Parent/  
Guardian +  
Teen  
Condition 1  
Office Visit!



# WEEK 4

## Experimental Condition 2 Schedule

My Subject ID: \_\_\_\_\_

SATURDAY SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

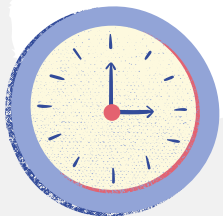
☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime





# WEEK 5

## Experimental Condition 2 Schedule

My Subject ID: \_\_\_\_\_

SATURDAY SUNDAY MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Teen  
Take capsule  
1-hour  
before  
bedtime

☐ Teen  
Wear  
Actigraph  
Wristwatch

☐ Teen  
Fill out Daily  
Sleep Diary  
in AM

☐ Parent/  
Guardian +  
Teen  
Condition 2  
Office Visit!

