

STOP-BANG Questionnaire

Do you SNORE loudly (louder than talking or loud enough to be heard through closed doors)? _____

Do you often feel TIRED, fatigued, or sleepy during daytime? _____

Do you have high blood pressure? _____

Has anyone OBSERVED you stop breathing during your sleep? _____

BMI more than 35kg/m²? _____

Age +50 years? _____

Neck circumference ≥ 43 cm? _____

GENDER: Male? _____

TOTAL

Yes	No

High risk of OSA **Yes** **5-8**
Intermediate risk of OSA **Yes** **3-4**
Low risk of OSA **Yes** **0-2**

If you have a score of 5 or higher out of 8 contact your health professional (or Dr Alison Bentley) as there is an estimated 80% probability of OSA (Obstructive Sleep Apnea)

EPWORTH Questionnaire

In the following situations, how likely are you to doze off or fall asleep, in contrast to just feeling tired? Use the following scale to choose the most appropriate number for each situation: 0 = No chance of dozing, 1 = Slight chance of dozing, 2 = Moderate chance of dozing, 3 = High chance of dozing

Sitting and reading _____

Watching TV _____

Sitting inactive in a public place (eg theatre or a meeting) _____

As a passenger in a car for an hour without a break _____

Lying down to rest in the afternoon when circumstances permit _____

Sitting and talking to someone _____

Sitting quietly after lunch without alcohol _____

In a car while stopped for a few minutes in traffic _____

TOTAL

0 - 3

Normal range of healthy adults **0-10**
Mild sleepiness **11-14**
Moderate sleepiness **15-17**
Severe sleepiness **18 or higher**

If you have a score of 15 or higher contact your health professional (or Dr Alison Bentley) if you are concerned