

Epworth Sleepiness Scale

How likely are you to fall asleep in the following situations, in contrast to feeling just tired. This refers to your usual way of life in recent times. Even if you haven't done some of these things recently try to work out how they would have affected you. 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

Situation	Score
Sitting and reading	
Watching TV	
Sitting inactive in a public place (e.g. a theater 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 a lunch without alcohol	
In a car, while stopped for a few minutes in traffic.	
Total	

- 0 to 6 Low risk
- 7 or 8 Intermediate risk
- 9 and up High risk seek a sleep specialist

Stop-Bang Sleep Apnea Questionnaire

STOP

	Yes	No
Do you Snore loudly (louder than talking or loud enough to be heard through closed doors)?	Yes	No
Do you often feel Tired, fatigued, or sleep during the daytime?	Yes	No
Has anyone Observed you stop breathing during your sleep?	Yes	No
Do you have or are you being treated for high blood pressure?	Yes	No

BANG

	Yes	No
BMI more than 35?	Yes	No
AGE over 50 years old?	Yes	No
NECK circumference > 16 inches?	Yes	No
GENDER: Male?	Yes	No
Total Yes Score		

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

Patient Name: _____

Date: _____