**WHY ARE WE ASKING ABOUT YOUR SLEEP?**

**SLEEP APNEA:**

**-Is Very Common and Undiagnosed**

**-Frequently Increases Cardiovascular Risk**

**-May Increase the Risk of Diabetes and Obesity**

**-May Compromise Your Health in Many Other Ways**

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| \*Do you or a family member have a smart device (mobile phone, tablet, or iPad)? | * Yes | * No |

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| **\*STOP-BANG Questionnaire:** Please answer by checking “Yes” or “No” next to each of the below questions. | | |
| **S**noring: Do you snore loudly, loud enough to be heard through closed doors or your bed-partner elbows you for snoring at night? | * Yes | * No |
| **T**ired: Do you often feel Tired, Fatigued, or sleepy during the daytime (Such as falling asleep during driving or talking to someone)? | * Yes | * No |
| **O**bserved: Has anyone Observed you Stop Breathing or Choking/Gasping during your sleep? | * Yes | * No |
| **P**ressure: Do you have or are being treated for High Blood Pressure? | * Yes | * No |
| **B**MI: >35? | * Yes | * No |
| **A**ge: >50? | * Yes | * No |
| **N**eck circumference: >16 inches? | * Yes | * No |
| **G**ender: Male? | * Yes | * No |
| **Total Score** |  | |

**---Office use only, please do not write below this line---**

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| **\*Indications/Diagnosis for the Sleep Study: Symptoms (*Please check at least 2 for WatchPAT® approval*)** | | |
| * E66.9 Obesity Unspecified | * G47.10 Excessive Daytime Sleepiness | * R45.4 Personality changes or irritability |
| * F32.9 Depression | * R03.0 Hypertension | * R53.82 Daytime Fatigue |
| * G44.021 Morning Headaches | * R06.83 Loud Snoring | * Witnessed Apneas during sleep |
| * G47.8 Unrefreshed by sleep | * R41.840 Difficulty Concentrating | * STOP-Bang (>3) Score:\_\_\_\_\_\_ |

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| --- | --- | --- | --- |
| * G47.1 Hypersomnia | * G47.30 Sleep Apnea Unspecified | * G47.33 Obstructive Sleep Apnea | * Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***(must include Diagnosis Code)*** |

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| **Patient qualifies for a WatchPAT® home sleep test?** | * Yes | * No |