Sleep-Disordered Breathing Screening Tool

NAVISleep RESPIRATORY SOLUTIONS

Sleep-related breathing disorders, such as snoring and obstructive sleep apnea (OSA), pose significant health risks and impact overall quality of life. Healthcare professionals play a crucial role in screening for sleep-disordered breathing by evaluating symptoms and assessing oral and throat structures, including the tongue, tonsils, uvula, and soft palate. These assessments provide valuable insights into potential contributors to OSA, enabling early diagnosis and guiding patients toward appropriate treatment options.

By integrating these screenings into routine care, healthcare professionals can improve patient outcomes and support long-term health.

Patient Name: _____ Phone: _____

Address: _____ DOB: _____

_____ Email: _____

Medical Screening for Sleep-Disordered Breathing

Please answer the following questions below to determine if you might be at risk.

S	Do you SNORE?	YES	NO
T	Do you often feel TIRED, Fatigued, or Sleepy during the daytime?	YES	NO
O	Has anyone OBSERVED you Stop Breathing during your sleep?	YES	NO
P	Do you have or are being treated for HIGH BLOOD PRESSURE?	YES	NO
B	BODY MASS INDEX more than 35?	YES	NO
A	AGE older than 50?	YES	NO
N	NECK size large (greater than 16" around)?	YES	NO
G	GENDER = Male?	YES	NO

TOTAL YES: ☐

0-2 Low Risk:

3-4 Moderate Risk:

5-8 High Risk:

Symptoms (Please mark all that apply)

- o Morning Headaches
- o Morning Hoarseness
- o Difficulty Concentrating
- o Moodiness
- o Feel Unrefreshed in Morning
- o Nighttime Grinding or Clenching
- o Jaw Clicking or Pain
- o Nighttime Congestion
- o Chronic Cough and/or Throat Irritation
- o Mouth Breathing
- o Weight Gain
- o Snoring
- o Frequent Waking at night, Restlessness
- o Frequent Urination at night
- o Night Sweating
- o Need Caffeine during the day to function
- o Hyperactivity
- o Family history of Sleep Apnea

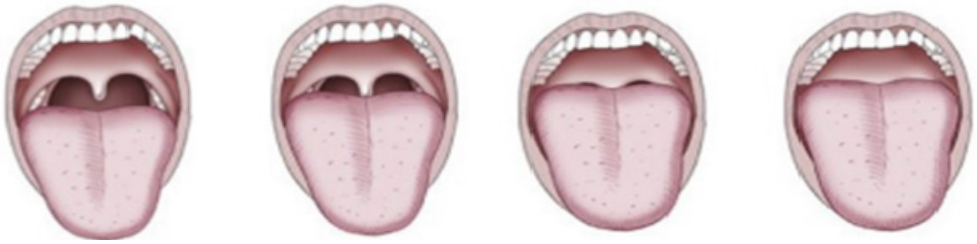
Medical Co-Factors (Please mark all that apply)

- o High Blood Pressure
  - o Controlled with meds
  - o Not medicated
  - o Meds taken with little effect
- o Congestive Heart Failure
- o Coronary Artery Disease
- o Atrial Fibrillation
- o Chronic Fatigue Syndrome
- o ADD/ADHD
- o Diabetes
- o Smoking
- o Asthma
- o GERD (gastric reflux)
- o Insomnia
- o Depression
- o Allergies

PHYSICIAN USE ONLY

Upper Airway Evaluation

Mallampati Classification:



Class I ***Class II*** ***Class III*** ***Class IV***

Class I-II Low Risk:
Class III Moderate Risk:
Class IV High Risk:

Tonsil Classification:

0 *Surgically removed tonsils*

1 *Tonsils hidden within tonsil pillars*

2 *Tonsils extending to the pillars*

3 *Tonsils are beyond the pillars*

4 *Tonsils extend to midline*

0-1 Low Risk:
2 -Moderate Risk:
3-4 High Risk:

Clinical Recommendations:

Based on the highest risk assessed through the Sleep-Disordered Breathing Screening Tool:

- The patient is at **high risk** for Sleep Apnea: A referral for a home sleep test is strongly recommended.
- The patient is at **moderate risk** for Sleep Apnea: A referral for a home sleep test is recommended.
- The patient is at **low risk** for sleep apnea: A referral for a home sleep test will be provided at your request.

Additional Notes:

Referrer Name: _____

Signature: _____

Date: _____

Please email or fax referral to:
referrals@navisleep.com
506-405-5592