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Respiratory and Sleep Physician

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Diagnostic Sleep Study Referral Form

(NB: Please ensure questionnaire over page is completed by GP in consultation with patient prior to submission of referral)

Patient Details:

Name: _____

Date of Birth: _____

Home Number: _____ Mobile: _____

Email: _____

Brief Clinical Information:

Relevant Comorbidities:

Relevant Medications:

Date of Referral: _____

Referring Practitioner (stamp and signature):

(PTO for Sections A and B – must be completed before an appointment will be allocated.)

SECTION A

	YES	NO
1. Snoring: Do you snore loudly?	<input type="checkbox"/>	<input type="checkbox"/>
2. Tiredness/fatigue: Do you often feel tired, fatigued, or sleepy during the daytime, even after a "good" night's sleep?	<input type="checkbox"/>	<input type="checkbox"/>
3. Observed apnea: Has anyone ever observed you stop breathing during your sleep?	<input type="checkbox"/>	<input type="checkbox"/>
4. Pressure: Do you have, or are you being treated for, high blood pressure?	<input type="checkbox"/>	<input type="checkbox"/>
5. Body mass index: > 35kg/m ²	<input type="checkbox"/>	<input type="checkbox"/>
6. Age: Are you older than 50 years?	<input type="checkbox"/>	<input type="checkbox"/>
7. Neck size: Does your neck measure more than 40cm around?	<input type="checkbox"/>	<input type="checkbox"/>
8. Gender: Are you male?	<input type="checkbox"/>	<input type="checkbox"/>

STOP-BANG Patient Questionnaire used with permission, F. Chung 2012 SCORE: _____

SECTION B

How likely are you to doze off or fall asleep in the following situations? Use the following scale to choose the most appropriate number for each situation:

0 = No chance of dozing	2 = Moderate chance of dozing
1 = Slight chance of dozing	3 = High chance of dozing
SITUATION	CHANCE OF DOZING
Sitting and reading	
Watching TV	
Sitting inactive in a public place (eg: a theatre or a meeting)	
As a passenger in a car for an hour without a break	
Lying down to rest in the afternoon when the 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	

Recommendations by Sleep Physician: