

BASIC HISTORY QUESTIONS FOR PATIENTS WHO MAY HAVE SNORING AND/OR SLEEP APNEA

Patient Name: _____ DOB: _____

PLEASE CIRCLE ANSWERS

Do you snore?	YES	NO
Do you snore heavily?	YES	NO
Has anyone told you that you stop breathing during sleep?	YES	NO
Have you woken from sleep choking or gasping for breath?	YES	NO
Do you wake in the morning feeling refreshed?	YES	NO
Is tiredness or sleepiness a problem during the daytime?	YES	NO
Do you struggle to stay awake at work?	YES	NO
Do you struggle to stay awake while driving?	YES	NO
On average, what time do you actually get to sleep at night?	PM	
How long does it take you to fall asleep after lights out?	minutes	
On average, how many times do you wake up during the night?	times	
How long does it typically take to get back to sleep?	minutes	
What time do you usually wake in the morning?	AM	
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Has anyone said you kick or move your legs a lot during sleep?	YES	NO
Do you have trouble breathing through your nose?	YES	NO
Do you get hay fever?	YES	NO
How many cups of caffeinated TEA do you drink daily?		
How many cups of caffeinated COFFEE do you drink daily?		
Please list any other stimulant drinks you have regularly:		
How many standard alcoholic drinks do you have daily?		
Do you smoke?	YES	NO
Have you had problems with HIGH BLOOD PRESSURE?	YES	NO
Have you had problems with HIGH CHOLESTEROL?	YES	NO
Have you had problems with DIABETES?	YES	NO
Have you had problems with HIGH GLUCOSE?	YES	NO
Have you had HEART DISEASE or a HEART ATTACK?	YES	NO
Have you had any type of STROKE?	YES	NO

What questions would you like to ask Dr Miller? _____

A reminder: it can be dangerous to drive a motor vehicle or operate machinery if sleepy or fatigued. This may particularly be a problem for people with sleep apnea. Please discuss with Dr Miller if you are concerned.

THANK YOU from Dr Stuart Miller