



Preoperative Questionnaire / Sleep Evaluation

Patient Name: _____

Date: _____

PATIENT: PLEASE ANSWER

- Have you ever been diagnosed with sleep apnea or use CPAP?
 Yes No
 If yes, are you using CPAP generally every night for more than 4 hours per night?
 Yes No
- Do you have high blood pressure or have you been told to take medication for high blood pressure?
 Yes No
- People who have shared (or are sharing) my bedroom tell me that I snore. Please pick the best response for the frequency of snoring:
 I don't know
 Never
 Rarely (1-2 times per year)
 Occasionally (4-8 times per year)
 Sometimes (1-2 times per month)
 Often (1-2 times per week)*
 Usually (3-5 times per week)*
 Always (every night)*
- I have been told by other people that I gasp, choke, snort or stop breathing while I am sleeping. Please pick the best response for the frequency of any of these symptoms:
 I don't know
 Never
 Rarely (1-2 times per year)
 Occasionally (4-8 times per year)
 Sometimes (1-2 times per month)
 Often (1-2 times per week)*
 Usually (3-5 times per week)*
 Always (every night)*

Neck Measurement: _____ cm

Total Number of Historical Features: _____

NURSING STAFF ONLY

<i>(Circle the patient's score)</i> Prediction of OSA - Sleep Apnea Clinical Score						
Neck Circ (CM)	Not Hypertensive			Hypertensive		
	Historical Features*			Historical Features*		
	None	One	Both	None	One	Both
<30	0	0	1	0	1	2
30-31	0	0	1	1	2	4
32-33	0	1	2	1	3	5
34-35	1	2	3	2	4	8
36-37	1	3	5	4	6	11
38-39	2	4	7	5	9	16
40-41	3	6	10	8	13	22
42-43	5	8	14	11	18	30
44-45	7	12	20	15	25	42
46-47	10	16	28	21	35	58
48-49	14	23	38	29	48	80
>49	19	32	53	40	66	110

*Historical Features: 1. Habitual snoring 2. Partner reports of gasping, choking or snorting

Probability of sleep apnea

- Low – Sleep Apnea Clinical Score <8
- Borderline – Sleep Apnea Clinical Score 8-14
- High – Sleep Apnea Clinical Score ≥15

Patient may be a difficult intubation (micrognathic mandible, large tongue base, narrow oropharyngeal inlet, enlarged tonsils).
Note: If checked, consider a PSG evaluation, especially if patient reports excessive daytime sleepiness in spite of a low Sleep Apnea Clinical Score.