## Silensor-sl Pre-screening Questionnaire



Delt's at a second	
Patient name:	
Age:	
Weight:	
Height:	
Alcohol consumption (units per week):  Do you smoke? Yes No If Yes, aver	ago per dau!
	age per day:
Do you take any prescribed medication?  Yes No	
Please give details:	
Body Mass Index (BMI)  The major risk factor for sleep apnoea is excess body weight. Your risk for sleep apnoea is higher if you are overweight with a body mass index (BMI) of 25 or more or obese with a BMI of 30 or higher.  BMI = Weight in kilograms Height in meters <sup>2</sup> Your BMI =	Example:  Tom weighs 100 kgs and is 1.8m tall.  First we multiply Tom's height by itself:  1.8 x 1.8 = 3.24  Next we divide Tom's weight by his height in meters <sup>2</sup> just calculated: 100 / 3.24 = 32.40  Tom's BMI is 32.4
Potential Indicators  Do you feel stiffness in the joints of your jaw?  Do your facial muscles feel strained or tense in the morning?  Do you grind or clench your teeth?  Do you snore every night?  Do you snore noisily?  Do you wake up with a headache?  Do you suddenly feel tired during the day?  Do you experience sleepiness while driving?	Yes       No
Previous Treatment  Have you had previous treatment for sleep disorders? Yes No Sleep Studies: Yes No   If yes, please give details:	Other
Have you purchased sleep aids in order to reduce your snoring? Yes Nasal strips: Yes No Pillows: Yes No If yes, please give details:	es No Other

## Flemons Adjusted Neck Circumference

- 1. Neck circumference: \_\_\_\_\_cm
- 2. Habitual snoring: + 3 points.
- 3. High blood pressure: + 4 points.
- 4. Night time choking/gasping: + 3 points.

Total of items 1 -4: \_\_\_\_\_

A score greater than 48 indicates high probability of having OSA (Obstructive Sleep Apnoea).

The Adjusted Neck Circumference (ANC) is calculated by measuring the patient's neck circumference (in cm) and adding additional centimetres if hypertension (4cm), snoring (3cm), and nocturnal choking (3cm) are present. An ANC >48 cm indicates a high probability of OSA.

(Likelihood ratios for a sleep apnoea clinical prediction rule. Flemons WW, Whitelaw WA, Brant R, Remmers JE Am J Respir Crit Care Med. 1994 Nov; 150(5 Pt 1):1279-85. Review Clinical practice. Obstructive sleep apnoea. Flemons WW N Engl J Med. 2002 Aug 15; 347(7):498-504).

Inches to Centimeters Conversion Chart					
ı	nches	CM	Inches	CM	
	12	30.48	17	43.18	
	12.5	31.75	17.5	44.45	
	13	33.02	18	45.72	
	13.5	34.29	18.5	46.99	
	14	35.56	19	48.26	
	14.5	36.83	19.5	49.53	
	15	38.1	20	50.8	
	15.5	39.37	20.5	52.07	
	16	40.64	21	53.34	
	16.5	41.91			

## Epworth Sleepiness Scale (ESS)

How likely are you to doze off or fall asleep in the following situations, in contrast to feeling just tired? This refers to your usual way of life so even if you have not done some of these things recently, try to address your likely response.

Use the following scale to choose the most appropriate number for each situation:

0 = would never doze, 1 = slight chance of dozing, 2 = moderate chance of dozing, 3 = high chance of dozing. The scores are added to produce a total score (range 0 - 24). It is important that you answer each question as best you can.

Situation	Chance of Dozing (0-3)
Sitting and reading	
Watching TV	
Sitting, inactive in a public place (e.g. 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 circumstances permit	
Sitting and talking to someone	
Sitting quietly after a lunch without alcohol	
In a car, while stopped for a few minutes in the traffic	
	Total

CARE PATHWAY				
Experience sleepiness while driving				
NO				
BMI result higher than 30	YES			
МО				
Epworth result higher than 10	YES			
NO				
Flemons result higher than 48	VEC			
NO	125			
▼ Control of the con				
Flemons result between 43-48 <b>and</b>	YES			
possible cardiac conditions				
NO				
Flemons result lower than 48				
and no underlying issues	<u> </u>			
YES	YES TO THE RESTRICTION OF THE PROPERTY OF THE			
Prescribe a Silensor-sl mandibular	Refer patient to their GP for further assessment. Prescribe			
advancement splint.	Silensor-sl mandibular advancement splint to mitigate symptoms if patient is dentally fit with no active oral dise			