

STOP-BANG Sleep Apnea Screening Tool

Name _____

Height _____ Weight _____

Age _____ Male / Female _____

STOP		
Do you SNORE loudly (louder than talking or loud enough to be heard through closed doors)?	Yes	No
Do you often feel TIRED , fatigued, or sleepy during the daytime?	Yes	No
Has anyone OBSERVED you stop breathing during your sleep?	Yes	No
Do you have or are you being treated for high blood PRESSURE ?	Yes	No
BANG		
BMI more than 35?	Yes	No
AGE over 50 years old?	Yes	No
NECK circumference > 16 inches (40cm)?	Yes	No
GENDER : Male?	Yes	No
TOTAL # of Yes Answers		
High risk?	Yes	No

Obstructive Sleep Apnea: 5-8 Yeses is High Risk, 3-4 Intermediate, 0-2 Low

About Sleep Apnea

There are two types of sleep apnea breathing disorders: *Obstructive Sleep Apnea (OSA)*, caused by the blockage or collapsing of the airway which cuts off the flow of air and *Central Sleep Apnea* which is caused by the lack of signals from the brain to the muscles used to breathe. Both types of sleep apnea have been linked to a number of serious conditions: high blood pressure, irregular heart rhythms, heart disease/heart attack/stroke, diabetes, driving- and work-related accidents. Sleep apnea can be diagnosed and treated.

How to Get Tested

If you are concerned about your STOP-BANG results contact your Primary Care Provider and share this page with them. They can determine which test will be most appropriate for you and send Gritman's Sleep Lab a referral order along with the STOP-Bang, your most recent history and physical, and a current list of all medications. They will complete any prior authorizations required by insurance. At Gritman's accredited Sleep Center, each sleep study is supervised by a registered polysomnographer and interpreted by a board certified sleep physician.