



### **STOP-BANG Sleep Questionnaire**

1. Do you snore?
2. Are you often tired during the day? Do you fall asleep reading a book even when you have had a good night sleep? Do you have trouble concentrating during the day?
3. Has anyone observed you stop breathing when you are sleeping?
4. Do you have High Blood Pressure?
5. Is your Body Mass Index greater than 30- see chart on the back?
6. Are you older than 50 years old?
7. Is your neck size greater than 17 inches for men or 16 inches for women?
8. Are you a male?

Answering yes to 4 or more put you at higher risk for breathing disorders while you sleep which can affect your health (high blood pressure, heart attack, stroke, atrial fibrillation, type II diabetes).