

Epworth Sleepiness Score *

How likely are you to doze off or fall asleep in the situations described below, in contrast to just feeling tired? This refers to your usual way of life in the last few weeks.

Even if you haven't done some of these things recently try to work out how they would have affected you. 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 |

<u>Situation</u>	<u>Chance of dozing 0 - 3</u>
Sitting and reading	_____
Watching TV	_____
Sitting inactive in a public place (i.e. theatre or meeting)	_____
As a passenger in a car for an hour without a break	_____
Lying down to rest in the afternoon when circumstances permit	_____
Sitting talking to someone	_____
Sitting quietly after lunch without alcohol	_____
In a car, while stopped for a few minutes in traffic	_____
Total Score	_____

Where to find us: www.RealSleep.co.uk

and

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Oxford Circus and Bond Street are the nearest tube stations. Metered street parking at £3/hr and undercover parking in Cavendish Square is available & within walking distance. (Marylebone is the nearest train station.)

Off the A34 at the Milton Interchange. Free off street parking available.

*The Epworth Sleepiness Scale (ESS) is a validated method of assessing the likelihood of falling asleep in a variety of situations. The maximum score is 24. The score can be used to clinically subdivide the patients into either the normal range (ESS <11), mild subjective daytime sleepiness (ESS = 11-14), moderate subjective daytime sleepiness (ESS = 15-18) or severe subjective daytime sleepiness (ESS >18). The scale should be completed independently by both the patient and their partner as the patient may underestimate the severity of their sleepiness due to its insidious onset, or in order to hide concerns over driving ability. Although the correlation between ESS and Obstructive Sleep Apnoea / Hypopnoea Syndrome (OSAHS) severity is relatively weak, the ESS is the best available tool to guide the clinician as to the patient's perception of his / her sleepiness.
(As published by the Scottish Intercollegiate Guidelines Network, 2003)

Fax referral form

Date: ____/____/____

Clinical notes

Patient name: Mr / Mrs / Miss / Other ____ Date of birth: _____ Day-time tel: _____

Sleep-study diagnosis:

A. H. I. or O.D.I. ESS score (see overleaf)

Brief clinical history

Request for
(Please tick appropriate box)

- Screen for OSA
- Diagnostic sleep study only (results will be returned to the referring physician)
- Diagnostic sleep study and, analysis by a ResMed partner physician and where appropriate, an onward diagnostic trial of CPAP
- CPAP set up

Requesting Doctor
Please send this referral by fax or post to your nearest
Centre for Healthy Sleep
Contact details overleaf

Doctor's name

Date
_____/_____/_____

Copies to

Doctor's signature

Doctor's stamp

- Upon receipt of this referral:
1. ResMed will contact your patient and arrange a consultation as requested above
 2. A copy of your patient's sleep study/ treatment report will be forwarded to you.