



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:

ResMed – Centre for Healthy Sleep

ResMed (UK) Ltd
96 Milton Park
Abingdon
Oxfordshire OX14 4RY

Tel: 01235 437826
Fax: 01235 861 288

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

ResMed – Centre for Healthy Sleep

8 Wimpole Street
London
W1G 9SP

Tel: 020 7151 0220
Fax: 020 7151 0221

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).

ResMed – Centre for Healthy Sleep

Suite 3, The Gardens
Coleshill Manor Office Campus
Coleshill
B46 1DL

Tel: 01675 437 750
Fax: 01675 437 751

Via the B4114, off the M42, M6 and M6 Toll Road.

*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 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)

RESMED

Fax Referral Form

Clinical Notes

Patient name

Day-time tel

Sleep-study diagnosis

A. H. I.

or O. D. I.

ESS score

Brief clinical history

Request for

(Please tick appropriate box)

Screen for OSA

Diagnostic sleep study only

Diagnostic sleep study and, where appropriate, diagnostic trial of CPAP & onward private referral to sleep physician

Trial of CPAP only

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 diagnostic sleep report will be forwarded to you