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Patient Name: _____ Date: _____

SLEEP QUESTIONAIRE

Because sleep is important to both your general and dental health, please complete this questionnaire.

Please check all that apply:

- □ I have been told I snore
- □ Experience daytime drowsiness/sleepiness
- □ I have been told "you stop breathing when you're snoring"
- □ Experience difficulty falling asleep
- □ Wake up during the night gasping or choking for air
- □ Experience night time choking spells
- □ Feeling unrefreshed in the morning
- □ I have morning hoarseness
- □ I have morning headaches
- □ I have swelling of ankles or feet
- □ I have been told I grind my teeth while sleeping
- □ I have jaw pain
- □ I have jaw clicking
- □ I feel fatigue
- □ I experience forgetfulness

Have you heard of or know what sleep apnea is: □ Yes □ No
Have you had a sleep study done: □ Yes □ No If yes, when? _____
Have you been diagnosed with sleep apnea? □ Yes □ No If yes, when? _____
Have you been prescribed a CPAP machine? □ Yes □ No

If you presently have a CPAP, do you use it nightly? □ Yes □ No
If yes, do you like your CPAP? □ Yes □ No
My physician recommended/prescribed a CPAP, but I refuse/cannot tolerate it: □ Yes □ No
Are you familiar with FDA approved custom fitted dental appliances as an alternate to a CPAP? □ Yes □ No
Are you aware of relatives that snore? □ Yes □ No Relationship? _____

If you have attempted treatment with a CPAP device but <u>cannot</u> tolerate it or comply with nightly use, please check all that apply:

- □ Mask leaks
- □ Noisy
- □ Cumbersome
- □ Claustrophobic association
- □ Latex Allergy
- □ Air causes dry eyes
- □ Air causes facial dry skin
- □ Cannot travel with CPAP
- □ Causes distended/irritated stomach
- □ CPAP air causes dry mouth
- □ Inability to get the mask to fit properly
- □ Discomfort from straps and headgear
- □ CPAP restricts movements during sleep
- □ An unconscious need to remove the CPAP
- □ Noise disturbs sleep and/or bed partner's sleep
- □ CPAP does not resolve symptoms
- □ Pressure on upper lip causes tooth related problems
- □ Has caused lack of intimacy in my relationship
- □ Confinement to bed while using CPAP
- □ Maintenance is time costly and time consuming