

Patient's Name _____ M / F
Address _____
Phone _____ Date of Birth _____

DOCTORS USE ONLY

☐ Home Sleep Study
☐ Diagnostic Sleep Study
☐ Diagnostic Sleep Study with Mandibular Device

SPECIALIST REFERRALS ONLY
☐ CPAP titration (Initial)
☐ CPAP review study
☐ MSLT / MWT
☐ Bi-level ventilation study

CLINICAL HISTORY / INDICATIONS

☐ Snoring
☐ Daytime Somnolence
☐ Witnessed Apnoeas

☐ Hypertension
☐ Obesity
☐ Type II Diabetes

SLEEP / RESPIRATORY PHYSICIAN REVIEW?
With Dr. _____

REFERRING DOCTOR DETAILS (include provider number)

Name _____

Address _____

Phone _____

Provider Number _____

Signature _____

Date of Referral _____



EPWORTH SLEEPINESS SCORE (ESS)

This score is a way of evaluating how sleepy someone is during the day. It is used internationally by sleep clinics, research groups and sleep physicians.

For each situation listed below, circle a number from 0 to 3 that best reflects how likely you are to fall asleep. Then add your total score up out of 24.

0	No chance of falling asleep
1	Slight chance of falling asleep
2	Moderate chance of falling asleep
3	High chance of falling asleep
Sitting and Reading	0 1 2 3
Watching TV	0 1 2 3
Sitting inactive in a public place	0 1 2 3
As a passenger in a car for an hour without a break	0 1 2 3
Lying down in the afternoon when circumstances permit	0 1 2 3
Sitting and talking to someone	0 1 2 3
Sitting quietly after lunch without alcohol	0 1 2 3
In a car while stopped in traffic for a few minutes	0 1 2 3

If your total score was more than 5, you have mild sleepiness and may not be getting the proper sleep you need. If your score is 10 or more you should talk to your doctor about how to improve your daytime energy levels and alertness.



THORACIC & SLEEP GROUP
QUEENSLAND

Thoracic and Sleep Group (QLD) provides full state-of-the-art services for the diagnosis, treatment and long term management of all sleep and respiratory disorders.

Your doctor can refer to one of our specialists if you are concerned you have a sleep disorder

Dr Andrew Scott
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scott.reception@tsgq.com.au



Accredited for compliance with the Australasian Sleep Association Standards for Sleep Disorders Services

People caring for how you *breathe* and *sleep*.

If your doctor requires you to have a diagnostic sleep study this can be done at the following locations.

All Sleep Centres Enquiries and Bookings
Ph 07 3870 1120 or 1800 119 446
Fax 07 3870 0233 Email admin@tsgq.com.au

The Wesley Hospital Sleep Disorders Centre
The Wesley Hospital, Suite 2&3, Level 9
Evan Thomson Building, 24 Chasely Street
Auchenflower Qld 4066

The Sunshine Coast Sleep Disorders Centre
Nambour Selangor Private Hospital
62 Netherton St, Nambour Qld 4560

Sleep and Stroke

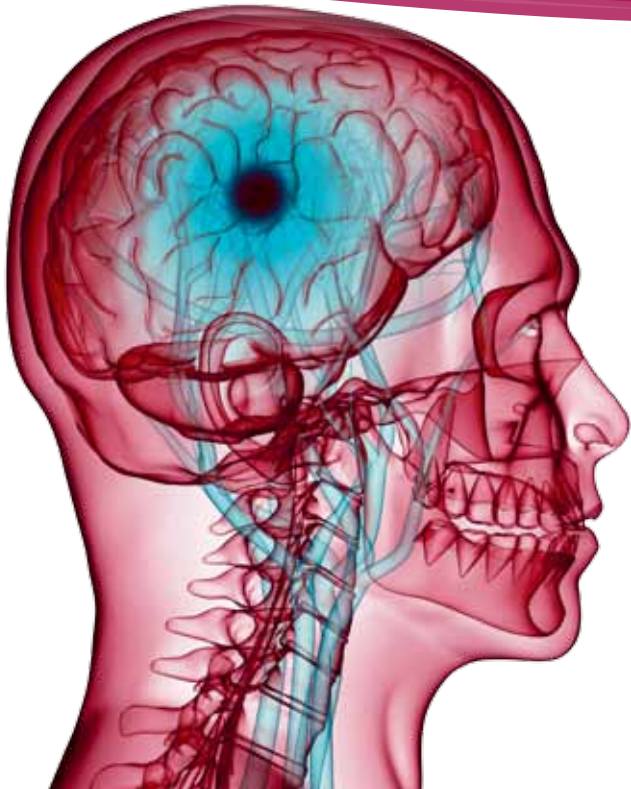
The relationship between sleep and stroke is important. Strokes can lead to sleep problems, and some sleep problems can increase the risk of stroke.



THORACIC & SLEEP GROUP
QUEENSLAND

This brochure will identify some things to look out for if you are having trouble sleeping and point you in the direction of help.

For more information on Sleep and Stroke, visit our website
www.thoracicansleep.com.au





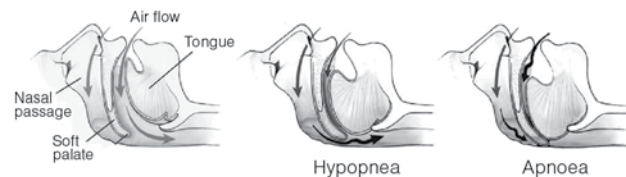
DO I HAVE A SLEEP DISORDER?

Sleep disruptions from a loud neighbour or noisy creatures of the night are annoying, but do not increase your risk of stroke.

However Obstructive Sleep Apnoea (OSA) increases your chance of having a stroke or complicating a stroke if you have one.

WHAT IS OBSTRUCTIVE SLEEP APNOEA?

OSA is characterised by stopping breathing during sleep. After 10 seconds of cessation of breathing it is called an 'apnoea'.



SYMPTOMS OF OBSTRUCTIVE SLEEP APNOEA

- Daytime sleepiness and fatigue
- Waking-up groggy and unrefreshed
- Morning headaches
- Depression, low mood, irritability
- Getting up to go to the bathroom at night
- Low libido or impotence
- Poor memory and concentration
- Loud snoring

WHY OBSTRUCTIVE SLEEP APNOEA CAN CAUSE STROKE

When you have an apnoea there can be a dramatic drop blood oxygen levels (hypoxia). This increases heart rate and blood pressure variability which increases the risk of hypertension and heart arrhythmias.

In addition there is a reduction in blood flow to the brain, further damage to blood vessels, acceleration of atherosclerosis, and increased clotting risk. This ultimately increases the risk of fatal and non-fatal stroke up to 10 fold.

HYPERTENSION

Successful treatment of hypertension is much less likely if OSA remains untreated. This further accelerates the risk of vascular disease, including repeat strokes.

It is important for your doctor to consider OSA if you have resistant hypertension.

WHAT IF I ALREADY HAD A STROKE?

In OSA there is night time hypoxia, lowered cardiac output and reduced cerebral blood flow. This contributes "further noxious stimuli" to a brain already damaged by stroke, which can then become susceptible to further strokes.

Research shows stroke patients with untreated OSA have a 40% longer rehabilitation period in hospital.



TREATMENT OF OBSTRUCTIVE SLEEP DISORDER

CPAP (CONTINUOUS POSITIVE AIRWAYS PRESSURE)

The most common treatment for OSA is CPAP. This 'splints' the airways open. This then normalises breathing and oxygen delivery to the body and brain. Symptoms associated with OSA can improve markedly. In stroke patients recent studies indicate CPAP therapy improves stroke outcomes and can shorten hospital days.

LIFESTYLE CHANGES

Risk factors that can be modified include weight loss, quitting smoking, avoiding excessive alcohol or sedatives, and sleeping on your side or stomach.

ORAL APPLIANCES

A 'mandibular advancement splint' holds the lower jaw forward, increasing the airway diameter behind the tongue. They can be effective for people who have mild to moderate OSA, or are intolerant of CPAP.

MEDICATIONS AND ALTERNATIVE TREATMENTS

Medications and alternative treatments to treat snoring and OSA have limited benefits. Nasal sprays, nocturnal oxygen and 'alertness medications' may assist the symptoms but will not control OSA.

MOST OF ALL...

It is important to maintain a relationship with your sleep specialist to ensure you are established on an effective programme. This will ensure you maintain the highest quality of sleep health.

**ARE YOU CONCERNED
THAT YOU MIGHT HAVE
A SLEEP DISORDER?**

**PLEASE FILL YOUR DETAILS
OUT ON THE BACK
AND GIVE IT TO YOUR
GP FOR A REFERRAL TO
OUR SLEEP CLINIC.**