

Patient name

Date of birth

Address

Phone

Respiratory Investigation

- Pulmonary function testing – comprehensive Spirometry Six minute walk test FeNO test
 with bronchodilator with bronchodilator Bronchial provocation test

Sleep Investigation

Option 1 – Physician consultation and sleep study

- Next available
 Nominated only Refer over page for listing

Dr

Option 2 – Sleep study (Complete ESS and STOP-BANG)

- Attended diagnostic Unattended home study

*Please also complete patient presentation below

Epworth sleeping scale (ESS)		
How likely is the patient to doze off or fall asleep in the following situations? Choose the most appropriate number for each situation:		
0 = would never fall asleep 2 = moderate chance of falling asleep 1 = slight chance of falling asleep 3 = high chance of falling asleep		
Sitting and reading		/3
Watching TV		/3
Sitting, inactive in a public place (theatre, meeting, etc.)		/3
As a passenger in a car for an hour without a break		/3
In a car, while stopped for a few minutes in traffic		/3
Lying down to rest in the afternoon when circumstances permit		/3
Sitting quietly after lunch without alcohol		/3
Sitting and talking to someone		/3
Symptomatically sleepy: scoring of 8 or more	Total	/24

STOP-BANG Questionnaire	
Assign 1 point for each 'yes' response	
Does the patient S nore loudly (louder than talking or loud enough to be heard through closed doors)?	
Does the patient often feel T ired, fatigued, or sleepy during daytime?	
Has anyone O bserved the patient stop breathing during their sleep?	
Is the patient being treated for high blood P ressure?	
B ody Mass Index more than 35 kg/m ² ?	
A ge: is the patient over 50 years old?	
Is the patients N eck circumference greater than 40 cm?	
G ender: is the patient male?	
High risk OSA: answering yes to 3 or more items	Total
	/8

Medicare requirements for STOP-BANG criteria on reverse of form

Patient presentation - please tick relevant boxes * indicates an attended (in-lab) sleep study may be required

- Cardiac co-morbidities* Neuromuscular disease* Insomnia* Hypertension Wheeze
 Neurological disease* Respiratory disease* Nocturia Dyspnoea Cough

Clinical notes:

Referring doctor	Signature / date	Copy to

- Dr Hari Adoni
- Dr Scott Claxton
- Dr Cheng Long Lu
- Dr Antonius Steven

Medicare requirements for sleep testing have changed

As of the 1st March 2021, patients referred directly for a sleep study must report symptomatic sleepiness via an Epworth score ≥ 8 **and** have moderate to severe likelihood of Obstructive Sleep Apnoea (OSA) via a STOP-BANG score ≥ 3 .

To determine if your patient is eligible for a diagnostic sleep study, please complete the screening tools below. Alternatively, select Option 1 for referral to a Sleep or Respiratory Physician for further investigation into symptoms or for additional testing including CPAP studies.

Appointment

Date

Time

Metro centre locations

- Joondalup - Shenton House**
Suite 201, Level 2
57 Shenton Avenue
Joondalup
Tel **9233 5200** | 9233 5210
- Perth**
Mount Medical Centre
Suite 3, 140 Mounts Bay Road
Tel **9233 5200** | Fax 9233 5210
- Yokine**
DR7 Medical Centre
Corner Royal Street and
Wanneroo Road
Tel **9233 5200** | Fax 9233 5210
- Nedlands**
Hollywood Medical Centre
Suite 20
85 Monash Avenue
Tel **9233 5200** | Fax 9233 5210
- Murdoch**
SGOJ Murdoch Medical Centre
Suite 5-7, 100 Murdoch Drive
Tel **9233 5200** | Fax 9233 5210
- Cockburn**
**Cockburn Health and
Community Centre**
Level 1, Suite 11,
11 Wentworth Parade, Success
Tel **9233 5200** | Fax 9233 5210
- Mandurah**
Southern Specialists Centre
3/35 Minilya Pkwy
Greenfields
Tel **9233 5200** | Fax 9233 5210

Regional centre locations

- Bunbury**
St John of God Bunbury
Suite 21, Cnr Robertson Drive
and Bussell Highway
Tel **9720 3403** | Fax 9720 3410
- Busselton**
19 Albert Street
Tel **9720 3403** | Fax 9720 3410
- Manjimup**
Warren District Hospital
1 Hospital Avenue
Tel **9720 3403** | Fax 9720 3410
- Margaret River**
Pharmacy 777 Margaret River
1/101 Bussell Highway
Tel **9720 3403** | Fax 9720 3410
- Carnarvon**
Pharmacy 777 Carnarvon
6 Robinson Street
Tel **9233 5200** | Fax 9233 5210
- Port Hedland**
Pharmacy 777 Port Hedland
Shop 9, Boulevard Shopping
Centre, Cnr McGregor and
Wilson Street
Tel **9233 5200** | Fax 9233 5210
- Karratha**
Pharmacy Help Karratha
16 Sharpe Avenue
Tel **9233 5200** | Fax 9233 5210