

Please fax referral to: 07 3112 5025 | Ph: 1300 911 755

**Initiator:** \_\_\_\_\_

### Patient Details

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: M / F

BMI (mandatory): \_\_\_\_\_

Medicare No: \_\_\_\_\_

Ref No: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

### Epworth Sleepiness Scale (ESS)

Please circle for each.

|   | Slight | Moderate | High |
|---|--------|----------|------|
| Sitting and reading                           | 1      | 2        | 3    |
| Watching TV                                   | 1      | 2        | 3    |
| Sitting inactive in a public place            | 1      | 2        | 3    |
| Being a passenger in a car for an hour        | 1      | 2        | 3    |
| Lying down in the afternoon                   | 1      | 2        | 3    |
| Sitting and talking to someone                | 1      | 2        | 3    |
| Sitting quietly after lunch (without alcohol) | 1      | 2        | 3    |
| Stopping for a few minutes in traffic         | 1      | 2        | 3    |

(Min 8 / 24 for Bulk Billing)      Total Score \_\_\_ / 24

### Sleep Services (Item 12250)

Ambulatory Sleep Study

(Level 2 PSG - Bulk Billed service)

**Referral Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Referring Doctor's Details

Name: \_\_\_\_\_

Surgery: \_\_\_\_\_

Provider no: \_\_\_\_\_

Phone: \_\_\_\_\_

**Signature:** \_\_\_\_\_

### STOPBANG

Please circle if applicable.

- S** - Does the patient **S**nore? 1
- T** - Does the patient feel **T**ired during the day time? 1
- O** - Anyone **O**bserved the patient to have stopped breathing during sleep? 1
- P** - Is the patient being treated for High Blood Pressure? 1
- B** - Is the patient's **B**MI greater than 35? 1
- A** - Is the patient's **A**ge 50 or older? 1
- N** - Is the patient's **N**eck circumference greater than 40cm? 1
- G** - Is the patient's **G**ender male? 1

(Min 4 / 8 for Bulk Billing)      Total Score \_\_\_ / 8

### Reason for referral

Please see patient for Level 2 - Bulk Billed - Sleep Study.