STOP-BANG

A validated 8-question screen for risk of sleep apnea.
Takes about a minute. Patients can fill it out in the waiting room.

East Coast Sleep

Check Yes or No for each question.	YES	NO
STOP · How you sleep and feel		
S **Snoring** — Do you snore loudly (louder than talking or loud enough to be heard through closed doors)?	☐	☐
T **Tired** — Do you often feel tired, fatigued, or sleepy during the daytime?	☐	☐
O **Observed** — Has anyone observed you stopping breathing during your sleep?	☐	☐
P **Pressure** — Do you have or are you being treated for high blood pressure?	☐	☐
BANG · About you		
B **BMI** — Is your body mass index more than 35 kg/m²? (See chart below.)	☐	☐
A **Age** — Are you older than 50?	☐	☐
N **Neck** — Is your neck more than 16 in (41 cm) for women, or 17 in (43 cm) for men?	☐	☐
G **Sex** — Are you male?	☐	☐

Total Yes answers ☐ / 8

0–2 Yes	3–4 Yes	5–8 Yes
Low risk	Intermediate risk	High risk
Refer if symptoms or concern	*Consider a sleep study*	*Sleep study recommended*

Also high risk: 2 or more Yes in S T O P, plus Yes to B, N or G.

STOP-BANG can miss sleep apnea in some women and in patients with AF. If symptoms suggest it, consider a sleep study.

BMI check · BMI is over 35 if weight is more than:

Height	5'0" 152 cm	5'2" 157 cm	5'4" 163 cm	5'6" 168 cm	5'8" 173 cm	5'10" 178 cm	6'0" 183 cm	6'2" 188 cm	6'4" 193 cm
Weight	179 lb 81 kg	191 lb 87 kg	204 lb 93 kg	217 lb 98 kg	230 lb 104 kg	244 lb 111 kg	258 lb 117 kg	273 lb 124 kg	288 lb 130 kg

Proprietary to University Health Network, www.stopbang.ca.
Modified from Chung F et al., Anesthesiology 2008; Br J Anaesth 2012; J Clin Sleep Med 2014.

The first visit is just the beginning.
We stay with your patient, and keep you posted.

East Coast Sleep
Better Sleep. Better You.