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OSA-50 Screening Questionnaire

The OSA-50 Screening Questionnaire is used to screen for Obstructive Sleep Apnoea (OSA) and assesses if you are at risk for Sleep Apnoea.

Please answer **Yes** or **No** to the following questions and tabulate the scores accordingly.

OSA 50 Screening Questionnaire	If YES, score
Waist circumference*: Male > 102cm Females > 88cm	3
Has your snoring ever bothered other people?	3
Has anyone noticed you stop breathing during your sleep?	2
Are you aged 50 years or over?	2
TOTAL SCORE	OUT OF 10

*Waist measurement to be measured at the level of the umbilicus

If you score more than 5 out of 10, consult your doctor to see if you need to investigate further as you may be at risk of Sleep Apnoea. The Epworth Sleepiness Scale can also be used to further determine the necessity for a Sleep Study.