www.sleepandlungcare.com.au
T: (03) 9422 0077
F: (03) 9454 9339

Sleep & Lung CARE

Healthlink: SALCCARE
Argus: sleepandlungcare@argus.net.au
E: reception@sleepandlungcare.com.au

Patient Name: _____ D.O.B.: _____

Address: _____

Postcode: _____

Mobile: _____ Home: _____

☐ **Consultation with a Specialist Physician**

Sleep Study (Bulk Billed)

☐ Hospital based sleep study
(Privately insured patients)

☐ Home based sleep study*

*Please complete the ESS and STOP-BANG questionnaires. Only patients with ESS ≥ 8 and STOP-BANG score ≥ 3 qualify for a direct referral as per the Medicare requirements.
Please see back of form for questionnaires.

Respiratory Function Tests (Bulk Billed)

☐ Spirometry & Transfer Factor

☐ FeNO & Spirometry

☐ Plethysmographic Lung Volumes

☐ Bronchial Provocation Test
(Additional fees apply)

☐ Maximal Respiratory Pressures

☐ 6 minute walk test

☐ Ambulatory Oxygen Assessment

CLINICAL NOTES

REQUESTING DOCTOR Provider Number: _____

Name: _____ Signature: _____

Address: _____

Phone: _____

Copies: _____ Fax: _____

EPWORTH SLEEPINESS SCALE (ESS)

Use the scale on the right to choose the most appropriate number for each situation	**0** = would **never** doze 1 = **slight chance** of dozing 2 = **moderate chance** of dozing 3 = **high chance** of dozing
SITUATION	**CHANCE OF DOZING (0 - 3)**
Sitting and reading	
Watching TV	
Sitting, inactive in a public place (e.g. a theatre or a meeting)	
As a passenger in a car for an hour without a break	
Lying down to rest in the afternoon when circumstances permit	
Sitting and talking to someone	
Sitting quietly after a lunch without alcohol	
In a car, while stopped for a few minutes in traffic	
SCORE TOTAL	

STOP-BANG QUESTIONNAIRE

Do you SNORE loudly?	**YES** ◯ **NO** ◯
Do you often feel TIRED, fatigued, or sleepy during the daytime?	**YES** ◯ **NO** ◯
Has anyone OBSERVED you stop breathing or choke or gasp for air during your sleep?	**YES** ◯ **NO** ◯
Do you have or are you being treated for high blood PRESSURE?	**YES** ◯ **NO** ◯
BMI more than 35 kg per m^2?	**YES** ◯ **NO** ◯
Age over 50 years old?	**YES** ◯ **NO** ◯
Neck circumference >40 cm?	**YES** ◯ **NO** ◯
Gender: Male?	**YES** ◯ **NO** ◯
TOTAL **YES** SCORE	

LOCATIONS

☐ **EPPING**
Epping Medical Centre
Level 2, 230 Cooper Street

☐ **BRAYBROOK**
330 Ballarat Road
Braybrook Physio &
Allied Health Clinic

☐ **KILMORE**
75 Powlett Street

☐ **DONCASTER EAST**
105 Blackburn Road

☐ **BRUNSWICK**
202 Moreland Road