

# NMCP Sleep Clinic STOP-BANG Screening Tool

1. **S**nooring

Do you snore loudly (louder than talking or loud enough to be heard through closed doors)?

2. **T**ired

Epworth sleepiness scale >12

3. **O**bserved

Has anyone observed you stop breathing during your sleep?

4. **P**ressure

Do you have or are you being treated for high blood pressure?

5. **B**MI

BMI more than 35 kg/m<sup>2</sup>?

6. **A**ge

Age over 50 yr old?

7. **N**eck circumference

Neck circumference greater than 17 inches or 43 cm?

8. **G**ender

Male?

STOP-BANG score = total number of yes responses. If greater than 5 then direct referral to sleep medicine. Otherwise follow OSA referral guidelines