

## Do I need help?

<u>If you answer **YES** to *any* of these questions</u> you may be suffering from a sleep disorder. Take this questionnaire to your doctor who can help you interpret your symptoms to understand the basis of your condition and what can be done to treat it. Ask your doctor if you might have a sleep disorder and if you need to have a sleep study performed.

## **Sleep Disorder Self-Assessment**

- 1. Do you snore loudly each night, or have frequent pauses in breathing while you sleep?
- 2. Do you wake up with headaches, fogginess, achy muscles, dry mouth or heartburn?
- 3. Are you very tired or sleepy during the day or fight to concentrate or stay awake?
- 4. Do you fall asleep easily during the day, while driving or during physical activity?
- 5. Are you overweight or gaining weight?
- 6. Do you have high blood pressure, heart disease or pain in your bones or joints?
- 7. Do you toss and turn, jerk or kick or are otherwise restless during sleep?
- 8. Do you wake frequently for no apparent reason?
- 9. Do you sweat excessively or have a pounding or irregular heartbeat during the night?
- 10. Do your friends or family say you have changed or are not acting like yourself?

American Sleep Medicine, LLC is here to help you in any way we possibly can. Please call us at **855-USLEEP2 or 855-875-3372** or visit our website <u>www.americansleepmedicine.com</u> to find a location near you.