

Oral Sleep Appliances

are clinically proven to help eliminate
the problem of snoring



We can design a comfortable ORAL SLEEP APPLIANCE that is worn at night to help patients' inhale and exhale more air per breath, which in turn reduces snoring and sleep apnea.

Patient Friendly
Superior Results
Easy to Fit
Infinitely Adjustable
Precise Control of Advancement
More room for tongue
Allows lips to close



Ask your provider for more information: 312-263-7822

EPWORTH SLEEPINESS SCALE FORM

Instructions: Be as truthful as possible. Print the form. Read the situation in the first column; select your response from the second column; enter that number in the third column. Total all of the entries in the third column and enter the total in the last box.

Situation	Responses	Score
Sitting and Reading	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
Watching Television	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
Sitting inactive in a public place, for example, a theater or a meeting	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
As a passenger in a car for an hour without a break	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
Lying down to rest in the afternoon	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
Sitting and talking to someone	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
Sitting quietly after lunch when you've had no alcohol	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
In a car while stopped in traffic	0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
TOTAL SCORE		

A score of 10 or greater indicates a possible sleep disorder. Take the completed form to your doctor.

Provided courtesy of Narcolepsy Network, Inc. 110 Ripple Lane North Kingston, RI 02852

Toll free 888-292-6522 Tel 401-667-2523 Fax 401-633-6567

E-mail: narnet@narcolepsynetwork.org Website: www.narcolepsynetwork.org