Melissa V. Rozas, D.D.S.
Dentistry For Infants, Children & Teens

Pediatric Sleep Questionnaire

Please fill this out as accurately and honestly as possible.
This screening tool gives us and you a validated way to measure your child's risk for OSA.

Patient Name:_____ Date:_____

D. O. B. _____ Age_____

	Yes	No	Don't Know
While sleeping does your child….			
have trouble breathing or struggle to breathe?			
stop breathing during the night?			
have "heavy" or "loud" breathing?			
snore regularly?			
snore loudly?			
snore more than half the time?			
appear to be a restless sleeper?			
child kicks during sleep?			
have nightmares?			
scream in their sleep?			
grind their teeth during sleep?			
sleepwalk?			
occasionally wet the bed? If so, how often?			
How many hours does your child sleep (average), including naps? Please circle below			
Less than 6 6-7 7-8 8-9 9-10 10-12 13-15 15-17			
Upon awakening, does your child…..			
have a dry mouth in the morning?			
tend to breathe through the mouth during the day?			
wake up feeling un-refreshed in the morning?			
have a problem with sleepiness during the day?			
have trouble getting going in the morning?			
wake up with headaches in the morning?			
We have noticed that our child…..			
does not seem to listen when spoken to directly			
has difficulty organizing tasks			
is easily distracted by extraneous stimuli			
fidgets with hands or feet or squirms in seat			
interrupts or intrudes on others (butts into conversations or games)			
has a teacher/supervisor commented that your child appears sleepy during the day			
has been diagnosed with ADD or ADHD			
Additionally….			
did your child stop growing at a normal rate at any time since birth?			
is your child overweight?			
does your child have allergies?			

The American Academy of Sleep Medicine Recommended Sleep Times:	
Toddlers (1-2 years)	11-14 hours
Preschool (3-5 years)	10-13 hours
School Aged (6-12 years)	9-12 hours
Teenagers (13-18 years)	8-10 hours

CHERVINE ET AL, PEDIATRIC SLEEP QUESTIONNAIRE: VALIDITY AND RELIABILITY OF SCALES FOR SLEEP DISORDERED BREATHING, SNORING, SLEEPINESS, AND BEHAVIORAL PROBLEMS, SLEEP MEDICINE 2000;1:21-32