Berlin Questionnaire

1.	Complete the following:	7. How often do you feel tired or fatigued after
	height age	your sleep?
	weight male/female	nearly every day
	weight male/lemale	3-4 times a week
		☐ 1-2 times a week
2.	Do you snore?	☐ 1-2 times a month
	□ yes	never or nearly never
	no	8. During your waketime, do you feel tired,
	don't know	fatigued or not up to par?
		nearly every day
	ou snore:	3-4 times a week
5.	Your snoring is?	1-2 times a week 1-2 times a week
	slightly louder than breathing	1-2 times a week
	as loud as talking	
	louder than talking	never or nearly never
	very loud. Can be heard in adjacent rooms.	9. Have you ever nodded off or fallen asleep
4.	How often do you snore?	while driving a vehicle?
77.50	nearly every day	yes
	3-4 times a week	no
	1-2 times a week	
	☐ 1-2 times a month	If yes, how often does it occur?
	never or nearly never	nearly every day
		3-4 times a week
5.	Has your snoring ever bothered other people?	1-2 times a week
	yes	1-2 times a month
	no	never or nearly never
6	Has anyone noticed that you quit breathing	
υ.	Has anyone noticed that you quit breathing during your sleep?	10. Do you have high blood pressure?
		yes
	 nearly every day 3-4 times a week 	no
	☐ 1-2 times a week	don't know
	1-2 times a week 1-2 times a month	L GOIT C KITOW
	never or nearly never	

Name

Address