

## Pediatric Sleep Questionnaire: Sleep-Disordered Breathing Subscale

Child's Name:			
Per	son completing form:		
chi	e:/ase answer these questions regarding the behavior of your child during sleep and wakefulness. The data acts in general during the past month. You should circle the correct response. A "Y" means "years "don't know."	_	
1.	WHILE SLEEPING, DOES YOUR CHILD:		
	Snore more than half the time?	N	DK
	Always snore?	N	DK
	Snore loudly?	N	DK
	Have "heavy" or loud breathing?	N	DK
	Have trouble breathing, or struggle to breathe?	N	DK
2.	HAVE YOU EVER SEEN YOUR CHILD STOP BREATHING DURING		
	THE NIGHT?Y	N	DK
3.	DOES YOUR CHILD:		
	Tend to breathe through the mouth during the day?Y	N	DK
	Have a dry mouth on waking up in the morning?Y	N	DK
	Occasionally wet the bed?	N	DK
4.	DOES YOUR CHILD:		
	Wake up feeling unrefreshed in the morning?	N	DK
	Have a problem with sleepiness during the day?	N	DK
5.	HAS A TEACHER OR OTHER SUPERVISOR COMMENTED THAT YOUR		
	CHILD APPEARS SLEEPY DURING THE DAY?	N	DK
6.	IS IT HARD TO WAKE YOUR CHILD UP IN THE MORNING?Y	N	DK
7.	DOES YOUR CHILD WAKE UP WITH HEADACHES IN THE MORNING?Y	N	DK
8.	DID YOUR CHILD STOP GROWING AT A NORMAL RATE AT ANY TIME SINCE BIRTH?	N	DK
9.	IS YOUR CHILD OVERWEIGHT?	N	DK
10.	THIS CHILD OFTEN:		
	Does not seem to listen when spoken to directly.	N	DK
	Has difficulty organizing tasks and activities.	N	DK
	Is easily distracted by extraneous stimuli	N	DK
	Fidgets with hands or feet or squirms in seat	N	DK
	Is "on the go" or often acts as if "driven by a motor"	N	DK
	Interrupts or intrudes on others (eg., butts into conversations or games)	N	DK

The 22 items of the SRBD Scale are each answered yes = 1, no = 0, or don't know = missing. The number of symptom-items endorsed positively (yes") is divided by the number of items answered positively or negatively; the denominator therefore excludes items with missing responses and items answered as don't know. The result is a number, a proportion that ranges from 0.0 to 1.0. Scores > 0.33 are considered positive and suggestive of high risk for a pediatric sleep-related breathing disorder. This threshold is based on a validity study that suggested optimal sensitivity and specificity at the 0.33 cut-off, 1.00