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*Achieving the balance of health & beauty.*

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#### AM I A CANDIDATE?

- 1) Do you snore or does your partner report any snoring? (yes) (no)
- 2) Do you often feel tired, fatigued or sleepy during the day? (yes) (no)
- 3) Has anyone observed you stop breathing while you're asleep? (yes) (no)
- 4) Do you have high blood pressure? (yes) (no)
- 5) Is your body mass index (BMI) more than 35? (yes) (no)
- 6) Are you over age 50? (yes) (no)
- 7) Is your neck circumference more than 40 centimeters (15.75 inches) (yes) (no)
- 8) Is your gender male? (yes) (no)

If you say yes to at least 3 of eight questions you have a high probability of OSA.