

Pediatric Sleep Questionnaire

While sleeping, does your child	Yes	No	Maybe
have trouble breathing or struggle to breathe?			
stop breathing during the night?			
have "heavy or loud breathing?			
have lips apart/mouth breathing?			
snore regularly?			
snore loudly?			
snore more than half the night?			
appear to be a restless sleeper, move around a lot, have messy sheets?			
child kick during sleep?			
have nightmares?			
scream in their sleep? Sleep-talk?			
grind their teeth during sleep?			
occasionally wet the bed?			
perspire a lot (moist or wet sheets or PJs) or experience nightsweats?			
sleep with his/her neck extended?			
have difficulty staying asleep?			
take a long time to fall asleep?			
Upon awakening, does your child			
have a dry mouth in the morning?			
tend to breathe through the mouth during the day?			
wake up feeling unrefreshed 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 early distracted by extraneous stimuli			
fidgets with hands or feet or squirms in seat			
interrupts or intrudes on others (i.e. butts into conversations or games)			

has a teacher or other supervisor comment that your child appears sleepy		
has been diagnosed with ADD/ADHD		
Additionally		
did your child stop growing a t normal rate at any time since birth?		
is your child overweight?		
does child's teeth seem crooked or misaligned?		
does your child have allergies?		
does your child have frequent colds? Ear infections? Has had tubes placed?		
does your child have difficulty with pronunciation, especially "s" and "th"?		
Your child gets approx hours of sleep each night.		