

Communication Assessment

Why have you decided to have your hearing tested today? (check all that apply)

- I want to be sure it's normal
- My family suggested I do this
- I feel my hearing is poor
- I think I need hearing aids
- My employer required it

If we were to find out through this evaluation that you could be helped by the use of hearing instruments, are you ready to try?

YES NO MAYBE

Have you worn hearing aids before? _____

If yes, for how long? _____

Were you satisfied with them? _____

| | YES | NO |
|--|-------|-------|
| Do you have difficulty understanding in a group? | _____ | _____ |
| Do you have difficulty understanding TV or radio? | _____ | _____ |
| Are you withdrawing from conversation? | _____ | _____ |
| Do you feel frustrated trying to listen? | _____ | _____ |
| Do you avoid going places because you can't hear well? | _____ | _____ |
| Do you ask people to repeat? | _____ | _____ |
| Do you have difficulty listening to worship services? | _____ | _____ |
| Do you have difficulty listening in a restaurant? | _____ | _____ |

Below is a list of factors to consider regarding hearing instruments. Please circle item(s) most important to you:

- Understand speech better
- Maintenance expense
- Follow up care
- Comfort
- Batteries
- Cost
- Cosmetics
- Function in noisy places

Hearing aid technology today is very advanced and offers many solutions to help in diverse listening situations. The following answers will help your doctor in choosing a technology that is helpful, but not so advanced that you have paid for features you are unable to use.

Circle your answers:

1. Do you use a cell phone? Smart phone Flip phone No cell phone (skip to #9)
2. If you use a Smart phone? iPhone Android
3. Do you want to have your hearing instruments pair (connect) with your smart phone? Yes No
4. Do you send text messages on your smart phone? Yes No
5. If yes, how often? Daily Few times a week Few times a month
6. Do you use apps on your smart phone (many hearing aids use apps today)? Yes No what's an app
7. Are you comfortable downloading apps and updating apps every few months when Android/Google or iPhone/Apple directs you? Yes No
8. Do you stream (watch video/movies or listen to music) on your smart phone? Yes No
9. Do you send email messages on a computer or other device (some hearing aids use this as a means for updating)? Yes No

If you want to know more about any of the above questions, or are unsure of how to answer, please do not hesitate to discuss with your doctor during the consultation today.