

Preparing for your visit

To get the most out of your consultation, please think about how your hearing has changed and affects your life. Take a moment to complete these questions and bring your answers with you to your appointment. You might want to discuss the questions with someone close to you.

1. Tell us about what brought you in here today?

To what extent do you agree/disagree with the following statements.

- | | Agree | | Neutral | | Disagree |
|--|-------|---|---------|---|----------|
| | 1 | 2 | 3 | 4 | 5 |
| 2. I find that people mumble a lot | | | | | |
| 3. I have difficulties hearing the television | | | | | |
| 4. I have difficulties hearing on the phone | | | | | |
| 5. I find it difficult to determine where sounds are coming from | | | | | |
| 6. It is difficult for me to hear soft speech, like whispers | | | | | |
| 7. I find it difficult to hear speech in places such as restaurants and parties | | | | | |
| 8. I feel like I have to concentrate a lot when more than one person is speaking to me | | | | | |

Agree		Neutral		Disagree
1	2	3	4	5

9. I tend to withdraw from social situations because it is difficult to follow conversations
10. I feel tired and/or mentally exhausted at the end of days that involve a lot of conversing
11. I have a hard time remembering what was said in conversations
12. I believe a hearing aid can change my quality of life
13. Please write down any questions you have about your hearing

14. Other comments

15. Would your spouse, family member or friend like to make any comments?

Please contact us if you have any questions before your next appointment. It is important to us that you get the best possible results as you move forward.