

# COMPANION QUESTIONNAIRE



Name: \_\_\_\_\_ Patient Name: \_\_\_\_\_

Relation to Patient: \_\_\_\_\_ Date: \_\_\_\_\_

In our professional experience, we have found that many of our patients describe hearing loss as affecting not only their normal daily routines, but the lives of those around them. We would like to ask you a few situational questions to better understand your companion's listening lifestyle and how we might improve their quality of life.

Does a hearing problem...	Always	Sometimes	Never
Make it difficult for your companion to converse on the telephone?			
Cause you to complain that your companion turns up the volume on the TV or radio too loud?			
Cause your companion to have difficulty following conversations in noisy environments such as a busy restaurant?			
Limit your companion's personal or social life?			
Cause your companion to ask people to repeat themselves?			
Cause your companion to have difficulty hearing women's or children's voices?			
Cause your companion to feel as though others mumble?			
Cause your companion to feel stressed or tired when listening for long periods of time? For example, during events, watching movies, long conversations, etc.			

**Please provide the top three listening situations where you would like your companion to hear better**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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If your companion does not currently use technology, please skip this section.

<b>My companion has difficulty hearing when using technology...</b>	<b>Always</b>	<b>Sometimes</b>	<b>Never</b>	<b>N/A</b>
1. While in background noise				
2. In the car				
3. On the phone				
4. In a conference room				
5. In a restaurant				
6. While listening to music				
7. While watching TV				
8. In group conversations				
9. In conversations with their spouse or family				
10. In conversations with women or children				

**Additional comments:** \_\_\_\_\_  
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