

# Your communication needs

Client name: \_\_\_\_\_

Clinician name: \_\_\_\_\_

Date: \_\_\_\_\_

Choose 3-4 situations

What is it like for you to communicate in the situation?

How important is it for you to improve your hearing in this situation?

Why did you place the mark where you did on the scale?

  Restaurant



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



  Family dinner



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

  Large group settings

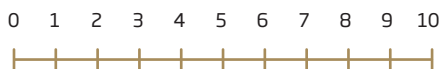


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

  Shopping malls and supermarkets



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



  Outdoors

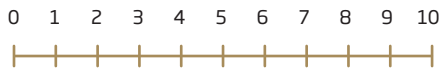


\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

  Office

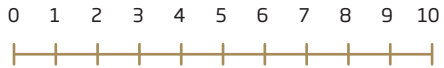


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  1:1 conversations



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

  Phone calls

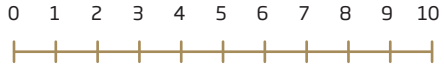


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\_\_\_\_\_



  Cinema



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_


  TV

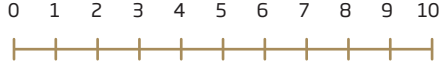


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 Other: \_\_\_\_\_




\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

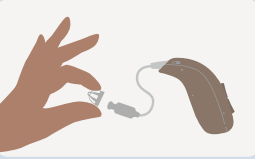
# Your hearing aid preferences

Which of these factors are most important for you when it comes to choosing a hearing aid?


 Clarity


 Accessories

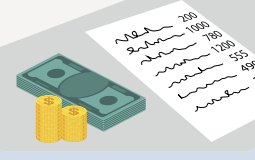
 Sound quality

 Dexterity

 Durability

 Connectivity

 Appearance

 Budget

 Ability to control device with smart phone

Notes:

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