

**Lafayette Hearing Center (765) 448-6226 phone (765) 448-9416 fax**  
**Questionnaire for Current Hearing Technology Users**

---

Brand and model of your hearing technology: \_\_\_\_\_

Style of technology:     Behind the Ear             In the Ear             In the Canal

Do you use technology in both ears?    Yes             No

How many years ago did you purchase your technology?    1-3 years    3-5 years    5+years

**My Current Technology:**

	Always	Sometimes	Never
Feels comfortable	1	2	3
Does not emit feedback or whistling noises	1	2	3
Provides hearing confidence on a day-to-day basis	1	2	3
Is cosmetically appealing	1	2	3

**My current hearing technology performance is satisfactory:**

	Always	Sometimes	Never		Always	Sometimes	Never
In background noise	1	2	3	In a restaurant	1	2	3
At religious services	1	2	3	When listening to music	1	2	3
At the movies	1	2	3	Watching TV	1	2	3
In the car	1	2	3	In group conversations	1	2	3
On the phone	1	2	3	Talking with spouse	1	2	3
In a conference room	1	2	3	Talking with children	1	2	3

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

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Please select your current lifestyle, and if different, please identify your desired lifestyle:**

**Active Lifestyle (Frequent Background Noise)**

- Current     Desired
- Meetings, group activities, shopping malls, family gatherings, diverse restaurants, demanding career, sporting events, all TV, driving

**Quiet Lifestyle (Limited Background Noise)**

- Current     Desired
- One-on-one conversations, visitors, religious services, quiet shops, some TV

**Casual Lifestyle (Occasional Background Noise)**

- Current     Desired
- Small meetings, small family groups, small shops, most television, quiet restaurants, religious services, driving

**Very Quiet Lifestyle (Rare Background Noise)**

- Current     Desired
- Limited visitors, small religious services, limited TV