



1. Information about the person

First name: <input type="text"/>	Family name: <input type="text"/>
Age: 5-17 <input type="checkbox"/> 18-39 <input type="checkbox"/> 40-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65+ <input type="checkbox"/> If child is under 5 years of age <input type="checkbox"/> Refer to ear and hearing professional	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>
Address: <input type="text"/>	Telephone: <input type="text"/>

2. Hearing test

Carry out hearing test

Only continue if ear screen confirms both ears are healthy/normal.

Side	500 Hz	1000 Hz	2000 Hz	4000 Hz	Average*	Check: Average of right and left. If difference between average of right and left is: • Less than 15 dB → Continue • 15 dB or more <input type="checkbox"/> Refer to ear and hearing professional
Right	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Left	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

* How to get average: Add value for 500, 1000, 2000, and 4000 Hz then divide by 4.

Test confidence:	Good <input type="checkbox"/> → Continue Poor <input type="checkbox"/> <input type="checkbox"/> Refer to ear and hearing professional	
Grade of hearing: Check table on this form.	Right: <input type="text"/>	Left: <input type="text"/>

3. Plan

Monitor:	Adult or child with normal hearing <input type="checkbox"/> Adult with mild hearing loss <input type="checkbox"/> If any → Teach ear care. Reassess in 1 year and recommend person returns sooner if they experience any pain, discharge or change in hearing.		
Refer:	Ear and hearing professional <input type="checkbox"/> Other: <input type="text"/>		
Consent:	Discuss the benefits of hearing aids. If the person and/or their caregiver prefers not to be provided with hearing aids, encourage them to return to the service if they change their minds at any time. Consent to provide hearing aids: Yes <input type="checkbox"/> No <input type="checkbox"/> Notes: <input type="text"/>		
Provide hearing aids:	Type: Preprogrammed hearing aids <input type="checkbox"/> Programmable hearing aids <input type="checkbox"/>		
	Earmould: Standard size: <input type="text"/> Other: <input type="text"/>		
	Side	Model	Serial number
	Right	<input type="text"/>	<input type="text"/>
	Left	<input type="text"/>	<input type="text"/>
	Battery type and size: <input type="text"/>		
Teach:	Advantages of hearing aids <input type="checkbox"/> How to use hearing aids <input type="checkbox"/> How to look after hearing aids <input type="checkbox"/> Checking battery life and when to replace batteries <input type="checkbox"/> How to improve understanding words <input type="checkbox"/>		
Follow up:	Adult: Remote <input type="checkbox"/> → 2 weeks In person <input type="checkbox"/> → 2 weeks	Child: In person <input type="checkbox"/> → 2 weeks	Follow up date: <input type="text"/>

Grade of hearing loss for adults and children aged 5-17*Children under the age of 5 should be referred to an ear and hearing professional*

Grade	Average	Recommendation
Within normal range	Average of less than 20 dB	Adults and children: → Hearing aids not needed → Teach ear care → Reassess in 1 year, or sooner if person experiences change in hearing or caregiver notices change in child's hearing.
Mild hearing loss	Average of 20 – 34 dB	Children → Hearing aid fitting Adults → Monitor and reassess in 1 year. Teach ear care.
Moderate hearing loss	Average of 35 – 49 dB	Adults and children → Hearing aid fitting
Moderately severe hearing loss	Average of 50 – 64 dB	Adults and children → Hearing aid fitting
Severe hearing loss	Average of 65 – 79 dB	Children → Refer to ear and hearing professional Adults → Hearing aid fitting
Profound hearing loss	Average of more than 80 dB	Adults and children → Refer to ear and hearing professional