

# HEARING INVENTORY “HI” FOR COMPANION

Your Name \_\_\_\_\_ Date \_\_\_\_\_ HI Score \_\_\_\_\_

Patient \_\_\_\_\_ Relationship to Patient \_\_\_\_\_

At Tri-City Audiology, it is our mission to find the best personal solution for each individual’s communication needs.

We will only be successful in reaching this goal if we take the time to compile the following information from the closest to the patient.....you!

**Please answer the following questions by checking the appropriate response**

	Yes	Sometimes	No
1. Have you observed a situation where a hearing problem made him/her feel embarrassed when meeting people?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Do you feel a hearing problem causes him/her to feel frustrated when talking to members of his/her family?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Have you noticed his/her difficulty hearing when someone speaks in a whisper?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Do you believe he/she is burdened by a hearing problem?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Are you concerned that a hearing problem causes him/her difficulty when visiting friends, relatives or neighbors?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Do you think a hearing problem causes him/her to attend large group situations less often than he/she would like?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Have you ever felt a hearing problem causes him/her to have arguments with family members?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Have you ever noticed a hearing problem cause him/her difficulty when listening to TV or radio?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Are you concerned that any difficulty with his/her hearing limits or hampers his/her personal or social life?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Have you observed that a hearing problem cause him/her difficulty when in a restaurant with relatives or friends ?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*“Thank you for choosing Tri-City Audiology. We are proud to be your hearing healthcare professionals.”*



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