



# SELF REPORTED HEARING AND NOISE EXPOSURE SHORT FORM

ID NUMBER:

FORM CODE: HNES

DATE: 11/11/2019  
Version: 1.0

## ADMINISTRATIVE INFORMATION

0a. Completion Date: / /   
Month Day Year

0b. Staff ID:

**Instructions:** *To be administered by interviewer.*

1. Which statement best describes your overall hearing (without a hearing aid)? Would you say your hearing is excellent, good, that you have a little trouble, moderate trouble, a lot of trouble, or are you deaf?

- Excellent ..... 1
- Good ..... 2
- A little trouble ..... 3
- Moderate hearing trouble ..... 4
- A lot of trouble ..... 5
- Deaf ..... 6

2. Do you currently use a hearing aid or other device in your right ear?

- Yes ..... Y
- No ..... N → **Go to Item 5**
- Other device ..... O

2a. Specify Other Device (cochlear implant, BAHA, etc): \_\_\_\_\_

3. How many years have you been using a hearing aid or other device in your right ear?

YEARS

4. Averaged over the past month, about how many hours per day have you worn your hearing aid or other device in the right ear?

HOURS

5. Do you currently use a hearing aid or other device in your left ear?

- Yes ..... Y
- No ..... N → **Stop Form**
- Other device ..... O

5a. Specify Other Device (cochlear implant, BAHA, etc): \_\_\_\_\_

6. How many years have you been using a hearing aid or other device in your left ear?

YEARS

7. Averaged over the past month, about how many hours per day have you worn your hearing aid or other device in the left ear?

HOURS



## Instructions for the Self-Reported Hearing and Noise Exposure Short (HNES) Form

### I. General Instructions

The questionnaire should be administered in a quiet room with minimal ambient noise. Participants should be encouraged to use any listening devices they may own or rely on.

In order to obtain consistent results and minimize any effect of the staff member administering the questionnaire, examiners should:

- Speak clearly and at a normal, businesslike pace so that participants can fully understand questions without extending the time needed to administer the questionnaire by constantly repeating the questions.
- Have participants read questions when they have trouble following oral exam administration.
- Consider modifying the pace if the participant shows frustration and/or a lack of understanding (i.e. slow down pace and increase volume of voice if necessary) or if the participant shows annoyance and consistently jumps ahead (i.e. increase pace of questions to match their pace).
- Have a relaxed and friendly manner.
- Maintain a neutral, but conversational, tone when asking questions. Please attempt to sound natural and enthusiastic about the questions regardless of how many times one has already asked the questions (i.e. it is difficult to consistently administer the same questionnaire but please avoid sounding robotic in questioning).
- Maintain a neutral response to participants' answers – do not indicate any reaction (e.g. surprise, disapproval).

A short break is discouraged but may be necessary if the participant becomes fatigued.

Some answers will trigger skipping ahead in questioning. For example, question 2 “*Do you currently use a hearing aid or other device in your right ear?*” has three possible answers ‘No’ or ‘Yes’ or ‘Other Device’. If ‘No’ is selected then questions 3-4 are skipped while if ‘Yes’ or ‘Other device’ is selected then questions 3 and 4 are administered as it directly related to question 2. Please keep this potential pattern in mind as the form is completed. **Please be familiar with all questions prior to administering the questionnaire.**

The majority of the questions in this form are multiple choice and should be selected using a check mark in the appropriate box. Some questions are asking for a specific amount of time that is open ended and that time period should be filled in the appropriate box. For example, a positive response to question 2m would trigger a need to fill in the number of years the participant has worn the device.

In general, since participant motivation and level of understanding can have a significant impact on performance and length of time required for administration, the questionnaire should be administered according to the protocol and in the following sequence:

- Explain the procedure to the study participant making sure to convey key points from the suggested script.
- Ask the participant if they have any questions.
- Read the participant the question and multiple choice answers (when appropriate) as they are written on the questionnaire (i.e. verbatim)
- Ask the participant to select the most appropriate answer.
- If the participant displays difficulty answering the question, first repeat question, answer, and/or instructions.
- Minimize missing data as much as possible by encouraging the participant to respond with their best guess or most appropriate answer if they respond “I don’t know”

Use the script provided to assure that all key points are covered. Do not provide additional description or encouragement beyond the key points provided by the QxQ.

Suggested script for instructions:

*I am going to ask you a series of questions with mostly multiple-choice answers about your hearing. I will read you the question and the list of answers. Please wait until all answers have been read aloud before answering. Please select the most appropriate answer for you. Please let me know if you do not understand the question or could not hear me and I will re-read it and let you read it. As always, all of your answers are kept confidential. Do you have any questions before we begin?*

## **II. Detailed Instructions for Each Item**

1. This question asks the participant to describe or rate their hearing without the use of a hearing aid.

Please encourage the participant to select the most appropriate answer.

2-7. Questions 2-7 collect information about the use of hearing devices used by the participant. Q2-4 asks about the right ear and Q5-7 asks about the left ear. Q3-4 and Q6-7 ask about duration of time the participant has had a hearing aid and how many hours per day do they wear the device.

Other devices include those purchased in a retail store or online that were not dispensed and fit by an audiologist or hearing aid dispenser; sometimes these are referred to as amplifiers. If a participant has any doubt to whether or not they have hearing aids, please ask them to consider how the device was purchased. Anything not purchased through a licensed hearing aid provider is not a hearing aid.

Excellent

Good

A little trouble

Moderate trouble

A lot of trouble

Deaf

Q. 1