Daily activities questions

Cochlear®
Hear now. And always

We want to learn how your hearing performance affects your daily activities. This form helps in understanding your experience and satisfaction with your current sound processor. Your responses may be shared with your insurance company to determine if your hearing and quality of life might improve with a replacement sound processor.

Patient Name: _____ Date of Birth: _____

Safety and quality of life

	1 easy	2 somewhat challenging	3 challenging
Hearing while operating a vehicle or bicycle (i.e. horns or emergency vehicles)	☐	☐	☐
Hearing important announcements in public places (i.e. airports or train stations)	☐	☐	☐
Hearing emergency alert systems (i.e. natural disasters or smoke alarms)	☐	☐	☐
Feeling safe crossing streets and hearing traffic from a distance	☐	☐	☐
Participating in telehealth appointments	☐	☐	☐
Feeling included, connected and involved despite hearing challenges	☐	☐	☐

IF YOU ANSWERED 2 OR 3 ON ANY OF THE ABOVE, PLEASE PROVIDE MORE DETAIL AND GIVE SPECIFIC EXAMPLES, IF POSSIBLE:

Social and entertainment

	1 easy	2 somewhat challenging	3 challenging
Attending large social events or parties where there is background noise	☐	☐	☐
Communicating with individuals in noisy environments (i.e. placing an order at a restaurant)	☐	☐	☐
Understanding speech when someone is wearing a mask (i.e. not able to read their lips)	☐	☐	☐
Enjoying live performances (i.e. concerts, plays or church services)	☐	☐	☐
Watching TV with friends or family	☐	☐	☐
Participating in sports (i.e. hearing coaches and teammates)	☐	☐	☐
Engaging on the phone/video calls	☐	☐	☐

IF YOU ANSWERED 2 OR 3 ON ANY OF THE ABOVE, PLEASE PROVIDE MORE DETAIL AND GIVE SPECIFIC EXAMPLES, IF POSSIBLE:

Workplace or school (skip if not applicable)

	1 easy	2 somewhat challenging	3 challenging
Participating in group discussions or meetings where multiple people are speaking at once	☐	☐	☐
Participating in conversations or meetings without visual aids	☐	☐	☐
Understanding verbal instructions or feedback in noisy environments	☐	☐	☐
Understanding and participating in meetings in person and virtually	☐	☐	☐
Hearing co-workers across workspaces	☐	☐	☐
Using a radio or walkie talkie	☐	☐	☐
Following lectures or classroom discussions	☐	☐	☐
Engaging in group projects or study sessions where verbal communication is key	☐	☐	☐
Understanding instructors if they are wearing a mask	☐	☐	☐

IF YOU ANSWERED 2 OR 3 ON ANY OF THE ABOVE, PLEASE PROVIDE MORE DETAIL AND GIVE SPECIFIC EXAMPLES, IF POSSIBLE:

If you need help understanding the activities of daily living or placing an order for an upgrade, please contact Cochlear Customer Support at 800 483 3123.

www.cochlear.com

FUN5543 ISS1 FEB25

Follow us on