

Daily activities questions

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.

This material is intended for health professionals. If you are a consumer, please seek advice from your health professional about treatments for hearing loss. Outcomes may vary, and your health professional will advise you about the factors which could affect your outcome. Always read the instructions for use. Not all products are available in all countries. Please contact your local Cochlear representative for product information.

The content of this guideline is intended as a guide for information purposes only and does not replace or remove clinical judgment or the professional care and duty necessary for each specific recipient case. Clinical care carried out in accordance with this guideline should be provided within the context of locally available resources, expertise, and standards of care and practice.

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