

Information for NBHSW Hearing Impaired Database

Name	DOB	NHS Number
-------------	------------	-------------------

Process/Steps	Date					Standard met/comments
Decision to aid						
Decision not to aid						
Hearing aid(s) fitted						
Behavioural test results		0.5kHz	1kHz	2kHz	4Khz	
R						
L						
Referred for Implant assessment						
Date of Implant						
Significant factors						
Presumed Aetiology						
Confirmed Aetiology						