REPORT OF AUDIOLOGIC EVALUATION

PURE TONE AUDIOMETRY

Frequency in Hertz (Hz)

125 250 500 1000 2000 4000 8000

HEARING THRESHOLD LEVEL IN dB

-10 0 10 20 30 40 50 60 70 80 90 100 110

TYMPANOMETRY

	LEFT	RIGHT
Tympanogram Type		
Middle Ear Pressure (mm2H O)		
Static Compliance (cm3)		

TYMPANOGRAM L

COMPLIANCE ↑ 10 9 8 7 6 5 4 3 2 1 0

-300 -200 -100 0 +100 +200

AIR PRESSURE

TYMPANOGRAM R

COMPLIANCE ↑ 10 9 8 7 6 5 4 3 2 1 0

-300 -200 -100 0 +100 +200

AIR PRESSURE

250 500 1000 2000 4000

MASK LEVEL

BC

AC

EM Dial NB White

LEGEND

	LEFT	RIGHT
Air Unmasked	X	○
Air Masked	□	△
Bone Unmasked	>	<
Bone Masked	⊐	⊏
No Response	→	←
Sound Field	S	

Acoustic Reflex

Stimulus Frequency	Contralateral L	Contralateral R	Ipsilateral L	Ipsilateral R

SPEECH

	SAT/ SRT	Mask	Discrimination %	Discrimination S L	Discrimination Mask	Discrimination S/N	MCL	UCL
L								
R								
L								
R								
SF								
Aid								

SRT Lists:

Discrimination Lists:

Rec: Tape: MLV:

EXAMINER NAME, TITLE, CERTIFICATION, SSAN

AUDIOMETERS(S) (MAKE, MODEL & SERIAL NUMBER)

CALIBRATION BY:

CALIBRATION DATE:

REMARKS:

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

LAST NAME-FIRST NAME-MIDDLE INITIAL

RATE/GRADE

SSAN

AGE

COMMAND

STATUS

AD RET RES DEP CIV

BRANCH

N MC A AF CG NON-DOD

REFERRED BY

ENT PED OTHER:

TIME

DATE

HOURS SINCE LAST NOISE EXPOSURE

ESTIMATED RELIABILITY

SIGNATURE AND TITLE OF EXAMINER