

Medac Corporate Health  
4402 Shipyard Blvd., Wilmington, NC 28403 (910) 452-7000

**AUDIOMETRY  
EXAMINATION**

Name \_\_\_\_\_ Date \_\_\_\_\_  
SS# \_\_\_\_\_ Company \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Auditory History (Baseline) Yes / No, Comments

History of ear infections, which ear, how frequently \_\_\_\_\_  
Previous hearing test, when, where, why? \_\_\_\_\_  
Any dizziness? How frequently? \_\_\_\_\_  
History of Measles, Mumps, Scarlet Fever? \_\_\_\_\_  
Previous head injury? Loss of consciousness? \_\_\_\_\_  
Family history of hearing loss? What age? \_\_\_\_\_  
Exposed to noise in military? How long, what type? \_\_\_\_\_  
Do you use firearms? Type? How often? Which shoulder? \_\_\_\_\_  
Ever worked at a noisy job, what, how long? \_\_\_\_\_  
Do you have noise in your ears? If so, describe. \_\_\_\_\_  
Previous ear surgery? \_\_\_\_\_  
Previous jobs? \_\_\_\_\_

Auditory History (Update) Yes / No, Comments

Any hearing problems now? \_\_\_\_\_  
Any drainage from ears (infection)? \_\_\_\_\_  
Any noise in your ears? \_\_\_\_\_  
Do you have dizziness, allergies, sinusitis? \_\_\_\_\_  
Any recent injuries, illnesses, operations? \_\_\_\_\_  
Any noisy hobbies? \_\_\_\_\_  
Do you have a second job? \_\_\_\_\_  
Do you have Diabetes, Arthritis, other chronic disorders? \_\_\_\_\_  
Do you take any medications? \_\_\_\_\_  
Do you use firearms? Which shoulder? \_\_\_\_\_  
Do you use power tools, chain saw, mower, tractor? \_\_\_\_\_  
History of Hypertension (Record BP) \_\_\_\_\_

Otoscopic Inspection: R \_\_\_\_\_ L \_\_\_\_\_

Audiogram Interpretation / Comments: \_\_\_\_\_

\_\_\_\_\_  
Signature of Physician / Physician's Assistant  
Medac Corporate Health Services

\_\_\_\_\_  
Date