



Visiting Nurse Association
Healthcare Partners of Ohio

Hearing Handicap Inventory in the Elderly Screening Questionnaire

Screening

Question	Yes	No	Sometimes
1. Does a hearing problem cause you to feel embarrassed when you meet new people?	4	0	2
2. Does a hearing problem cause you to feel frustrated when talking to members of your family?	4	0	2
3. Do you have difficulty hearing when someone speaks in a whisper?	4	0	2
4. Do you feel handicapped by a hearing problem?	4	0	2
5. Does a hearing problem cause you difficulty when visiting friends, relatives, or neighbors?	4	0	2
6. Does a hearing problem cause you to attend religious services less often than you would like?	4	0	2
7. Does a hearing problem cause you to have arguments with family members?	4	0	2
8. Does a hearing problem cause you difficulty when listening to TV or radio?	4	0	2
9. Do you feel that any difficulty with your hearing limits or hampers your personal or social life?	4	0	2
10. Does a hearing problem cause you difficulty when in a restaurant with relatives or friends?	4	0	2
Scoring: Yes = 4 No = 0 Sometimes = 2			
Interpretation of Total Score	Total Score		

0-8 = No handicap

10 - 24 = Mild to moderate handicap

26 - 40 = Severe handicap

REFER TO PHYSICIAN IF SCORE OF 10 OR MORE

Adapted from: Ventry I, Weinstein B. Identification of elderly people with hearing problems. Asha. 1983; 25:37-42. Reproduced by permission of the American Speech and Hearing Association, 2002.

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