



Sino-Nasal Outcome Test (SNOT-22) Questionnaire

Name: _____

DOB: _____

Date: _____

Below you will find a list of symptoms and social/emotional consequences of your nasal disorder. We would like to know more about these problems and would appreciate your answering the following questions to the best of your ability. There are no right or wrong answers, and only you can provide us with this information. Please rate your problems as they have been over the past two weeks. Thank you for your participation.

A. Considering how severe the problem is when you experience it and how frequently it happens, please rate each item below on how "bad" it is by circling the number that corresponds with how you feel using this scale:

	No Problem	Very Mild Problem	Mild or Slight Problem	Moderate Problem	Severe Problem	Problem as bad as it can be	Most important items
1. Need to blow nose	0	1	2	3	4	5	[]
2. Sneezing	0	1	2	3	4	5	[]
3. Runny nose	0	1	2	3	4	5	[]
4. Nasal obstruction	0	1	2	3	4	5	[]
5. Loss of smell or taste	0	1	2	3	4	5	[]
6. Cough	0	1	2	3	4	5	[]
7. Post-nasal discharge	0	1	2	3	4	5	[]
8. Thick nasal discharge	0	1	2	3	4	5	[]
9. Ear fullness	0	1	2	3	4	5	[]
10. Dizziness	0	1	2	3	4	5	[]
11. Ear pain	0	1	2	3	4	5	[]
12. Facial pain/pressure	0	1	2	3	4	5	[]
13. Difficulty falling asleep	0	1	2	3	4	5	[]
14. Waking up at night	0	1	2	3	4	5	[]
15. Lack of a good night's sleep	0	1	2	3	4	5	[]
16. Waking up tired	0	1	2	3	4	5	[]
17. Fatigue	0	1	2	3	4	5	[]
18. Reduced productivity	0	1	2	3	4	5	[]
19. Reduced concentration	0	1	2	3	4	5	[]
20. Frustrated/restless/irritable	0	1	2	3	4	5	[]
21. Sad	0	1	2	3	4	5	[]
22. Embarrassed	0	1	2	3	4	5	[]
TOTALS (each column):							
GRAND TOTAL SCORE (all columns together):							

B. Please check off the most important items affecting your health in the last column (max of five items)

Michael Setzen Otolaryngology, PC

600 Northern Blvd, Suite 113, Great Neck, NY, 11021 • 516.829.0045 • fax: 516.829.0441 • www.michaelsetzen.com

130 East 77th Street, 10th Floor, New York, NY, 10075

Past President American Rhinologic Society
 Past Chairman American Academy of Otolaryngology - Head and Neck Surgery
 Clinical Professor of Otolaryngology, Weill Cornell Medical College
 Chief Rhinology Section - North Shore University Hospital

Attending:
 North Shore University Hospital at Manhasset, NY.
 St. Francis Hospital, Roslyn, NY.
 Lennox Hill Hospital, New York, NY.
 NY Eye and Ear Infirmary, New York, NY.
 Day-Op Center of Long Island, Mineola, NY.



Eustachian Tube Dysfunction Patient Questionnaire (ETDQ-7)¹

Name: _____ Date: _____

Next to each question, circle the number that best describes how you feel.

During the past 1 month, how much of a problem was each of the following?	No Problem		Moderate Problem			Severe Problem	
1. Pressure in the ears?	1	2	3	4	5	6	7
2. Pain in the ears?	1	2	3	4	5	6	7
3. A feeling that your ears are clogged or "under water"?	1	2	3	4	5	6	7
4. Ear problems when you have a cold or sinusitis?	1	2	3	4	5	6	7
5. Crackling or popping sounds in the ears?	1	2	3	4	5	6	7
6. Ringing in the ears?	1	2	3	4	5	6	7
7. A feeling that your hearing is muffled?	1	2	3	4	5	6	7

Do you get these symptoms in one ear only or both ears?

Left ear only Right ear only Both ears

Total Score _____ $\div 7 =$ **Mean item score** _____

1. ETDQ-7 Copyright 2012 by McCoul ED, Anand VK and Christos PJ. Weill Cornell Medical College, New York, New York.

Caution: Federal (U.S.) law restricts the sale, distribution or use of the ACCLARENT AERA™ by or on the order of a physician who is trained in the use of Acclarent technology. Eustachian tube balloon dilation has associated risks, including tissue and mucosal trauma, infection, or possible carotid artery injury. Prior to use, it is important to read the Instructions for Use and to understand the contraindications, warnings, and precautions associated with these devices.