



## Bone Anchored Hearing Aid Questionnaire

The Ear Foundation

Funded by Cochlear Europe

**Please tick the answers that apply to you.**

**If you cannot remember ages at which various events occurred, please give approximate ages**

Name:

Age:

Male  Female

1. Have you been deaf since birth? Yes  No

If **No**: how old were you when you became deaf?

2. Has your hearing loss changed at all since you became deaf? Yes  No

If **yes**: please describe the way in which it has changed and approximately your age when this was noticed.

3. At the moment is your hearing loss in both ears or just one ear

Both ears  left ear  right ear

4. At the moment how is your hearing loss described

profound  severe  moderate  partially hearing

other description

If 'other' please give details

If both ears different please give details

Is your hearing loss a conductive loss or a mixed loss?

Conductive  mixed loss (sensori-neural and conductive)  don't know

5. Do you have a BAHA fitted at the moment?

Yes, one  Yes, two  No

6. How old were you when your first BAHA was fitted?

7. If two BAHAS were fitted at different times, please give the ages at which each was fitted.

Left  Right

8. Have you ever had your BAHA replaced? Yes  No

If yes, at what age?

9. Have you ever had to stop using your BAHA for any reason? Yes  No

If yes, why:

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***Questions 10 to 26 relate to the first BAHA that you had fitted.***

10. What is the main reason it was decided a BAHA would best meet your needs?

Tick all of the following that apply and add any relevant additional information

Issues related to shape of ear

Issues related to the ear canal

Issues related to bone formation within ears

Issues related to ear infections

Issues related to a growth or tumour in the ear area

Issues related to shape of skull

Issues related to the skin in the area of the ear

Issues related to need to send sound from one ear  
to the better ear (contra lateral fitting)

Other

Additional information

11. Before you had a BAHA did you try other types of hearing aid? Yes  No

What did you try?

When?

Why was there a problem with this?

12. Who first suggested that you should have a BAHA?

GP  ENT Specialist  Audiologist  Teacher

Family member  Friend/acquaintance  Other  (specify)

13. Had you heard anything about BAHAs before they were suggested to you?

Yes  No

If **yes**: how had you heard?

What information did you have?

14. Did you try a soft test headband before you decided to have a BAHA? Yes  No

If **Yes** how long did you try this for?

15. Did you have the opportunity to talk to a BAHA user before you made the decision?

Yes  No  Offered but I did not want to

If **yes**: Was this helpful?

If **no**: Would you have liked this?

16. Was the decision to have your first BAHA an easy or difficult one for you to make?

Easy  difficult  neither easy nor difficult

If **difficult or easy** please describe why.

17. List the main problems that you had which made you decide to try a BAHA or BAHAs. These could be related to health, work, family life, social life or any other relevant areas.

List three if possible, add more if appropriate.

1

2

3

18. Did you suffer any side effects in the period immediately after the operation?

19. How soon after the operation was the BAHA sound processor fitted ?

20. What advice and support did you have about using the BAHA at the time it was fitted?

21. Did you have continuing advice and support after the BAHA had been fitted?

22. Was any person particularly helpful?

23. Did you have adequate help or advice?

Adequate  would have liked more  too much advice

If you would have liked more, what would have been useful?

Was any of the advice you had inappropriate? Yes  No

If **yes**, what was this?

24. After you had the BAHA fitted , did the problems you had before (as in your answer to Q 17) get better or did they stay the same? Please reply with respect to all problems mentioned.

25. Are there any additional positive changes your first BAHA has made to your life?

Yes  No

If **yes**, please describe

26. Did your first BAHA have any disadvantages or problems for you?

If **yes**, please describe

27. Have you ever requested a second BAHA in addition to your first or has it ever been suggested you should have a second BAHA?

Yes I requested a second BAHA  Yes it has been suggested  Neither

If **yes**: Was it agreed you should have an additional BAHA? Yes  No

If **no** why not I did not want it

It was not felt to be suitable for me

Funding issues

Other

(Specify)

***If you have had a BAHA replaced answer questions 28 to 34. Otherwise go to question 35.***

28. Why was it decided to replace your first BAHA?

29. Was the problem:

with the sound processor  the implant in your head  both

Please list all problems with the first BAHA?

30. Was the decision to have your first BAHA replaced an easy or difficult one for you to make?

Easy  difficult  neither easy nor difficult

If difficult please describe why

31. Did you have additional advice and support about using the replacement BAHA at the time it was fitted?

If **yes**, please say what advice you were given?

If **no**: would advice have been useful or was it not necessary?

32. Did the new BAHA solve the problems that you had with the first BAHA? Please reply with respect to all problems mentioned in Question 29.

33. Are there any additional positive changes the replacement BAHA has made to your life? Yes  No

If **yes**, please describe

34. Did the replacement BAHA have any disadvantages or problems for you? Yes  No

If **yes**, please describe

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***If you have had a second BAHA fitted in addition to your first BAHA, please answer question 35 to 42 . If not go to question 43.***

35. Was the decision to have a second BAHA an easy or difficult one for you to make?

Easy       difficult       neither easy nor difficult

If difficult please describe why

36. List the main problems that you had which made you decide to try a second BAHA. These could be related to health, work, family life, social life or any other relevant areas.

List three if possible, add more if appropriate.

1

2

3

37. What advice and support did you have about using the second BAHA at the time it was fitted?

38. Did you have continuing advice and support after the second BAHA had been fitted?

Yes       No

39. Did you have adequate help or advice?

Adequate       I would have liked more       too much advice

If you would have liked more, what would have been useful?

Was any of the advice you had inappropriate? Yes       No

If yes, what was this?

40. After you had the second BAHA fitted , did the problems you had before (as in your answer to Q 36) get better or did they stay the same? Please reply with respect to all problems mentioned.

41. Are there any additional positive changes your second BAHA has made to your life?

If yes, please describe

42. Did your second BAHA have any disadvantages or problems for you? Yes  No

If yes, please describe

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***For all***

43. Has the BAHA made a difference to your life in general? Yes  No

If yes which of the following areas have been affected?

***Please tick all that are relevant and add any additional comments***

Communication at home

Communication at work

Communication socially

Relationships

Social life

Health issues

General well being

44. Do you feel the general public are well informed about BAHAs? Yes  No

45. Do you feel it easy to answer questions that people ask about the BAHA?

46. Are there any changes you would like to see in the assessment for a BAHA or the support or advice given? Yes  No

If yes what?

47. Are there any changes you would like to see in the design of the BAHA

Yes  No

If yes, what?

48. If you need a repair to your BAHA sound processor/s, is it easy to get this?

Yes  No  I have not needed a repair

If no: What is the difficulty? (Tick all that apply)

Making arrangements for the BAHA to be repaired

Time taken for repair

Quality of repair

Other

49. What advice would you give to anyone thinking about having a BAHA?

50. Did you have any problems getting funding for your BAHA?

No  Yes for my 1st BAHA  Yes for Replacement BAHA

Yes for BAHA in opposite ear

51. Would you be prepared to take part in a follow up interview?

No

Yes I would be prepared to take part in a follow up interview.

If Yes, would you require communication support in an interview? Yes  No

If yes, what type of support would you require?

## **Thank you for filling in this questionnaire**

The information you give will be confidential to the research team and your details will not be given to anyone else.

If you would like to be contacted about future research projects at the Ear Foundation, please tick the box  and write your contact details in the box below and we will add you to our Research Forum Database.

Name

Address:

E-mail:

**Please save this onto your computer with your initials and e-mail a copy to Rachel@earfoundation.org.uk**