

Hearing Loss and Tinnitus DBQ Sample

J. Rice Portfolio Sample

Getting Started

The purpose of this sample is to help you understand and complete the Hearing Loss and Tinnitus Disability Benefits Questionnaire (DBQ). This document contains two separate views of the sample, the worksheet view and the report view.

Worksheet View

As a provider, you will document your exams using the DBQ worksheets on the Provider Portal. These worksheets have been created by LHI to make the documentation process as easy and quick as possible. A sample DBQ in the worksheet view can be found on pages (2-14).

Report View

After the DBQ worksheet has been saved, a DBQ report is created. The report is the document sent to the VA. LHI will automatically transfer your exam findings from the DBQ worksheet to the DBQ report. After submitting the DBQ worksheet, the DBQ report will need to be electronically signed by you, the provider. A sample DBQ in the report view can be found on pages (15-23)

J. RICE

Review Tab

Review | History | Audiogram | Additional Documentation | Diagnosis | Tinnitus | Diagnostic Testing

EVIDENCE REVIEW

This exam is for:

- 1. Tinnitus only (audiologist or non-audiologist clinician)
- 2. Hearing loss and/or tinnitus (audiologist, performing current exam)
- Hearing loss and/or tinnitus (audiologist or non-audiologist clinician, using audiology report of record that represents Veteran's current condition)

EVIDENCE REVIEW

In order to provide an accurate medical opinion, the Veteran's records should be reviewed, if available.

Was the Veteran's VA claims file reviewed? Yes No

If YES, list any records that were reviewed BUT WERE NOT INCLUDED in the Veteran's VA Claims file: 0/1000

Did the Veteran bring in records to the exam that you had time to review? Yes No

History Tab

Review | **History** | **Audiogram** | **Additional Documentation** | **Diagnosis** | **Tinnitus** | **Diagnostic Testing**

History

a. How would you best describe your hearing? Hearing is fine with no concerns

- Difficulty hearing in noisy environments
- Difficulty hearing in group situations
- Able to hear but not clearly
- Difficulty hearing from a distance
- Unable to hear

b. Do you feel that your hearing is better in one ear versus the other? Yes No

If YES, which ear is better?

- Right
- Left

c. Have hearing aids ever been recommended? Yes No

d. Have you ever had ear surgery? Yes No

e. Have you been diagnosed with and/or received any of the following? None of the diagnoses below

- Otosclerosis
- Labyrinthitis
- Permanent hearing loss
- Bell's palsy
- Cholesteatoma
- Meniere's disease
- Ossicular dislocation/fixation
- Sudden hearing loss
- Barotrauma
- Acoustic neuroma
- Meningitis
- Measles
- Cancer
- Radiation/chemotherapy
- Long term IV antibiotics
- Head trauma

Please describe the marked diagnoses: 51/1000

Family History of Hearing Loss

a. Please describe relevant family history of hearing loss: 4/1000

History Tab (Continued)

Post-Service History of Noise Exposure

a. Have you been exposed to loud noises, recently or post-service? No, none apply

- Fire Arms
- Aircraft Noise
- Farm Equipment
- Heavy Equipment
- Power Tools
- Motorcycles/recreational vehicles
- Other

Describe any noise exposure marked above:

Recreational hunting and was a farmer for more than 30 years.

61/1000

Audiogram Tab

Review	History	Audiogram	Additional Documentation	Diagnosis	Tinnitus	Diagnostic Testing	<	◇	>
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Audiogram

All testing must be conducted following VA provided instructions to be valid for VA disability evaluation purposes.

Click here to review instructions.

1. Objective Findings

a. Puretone thresholds in decibels (air conduction)

Click here to review instructions.

Please enter CNT in the box for any frequencies that could not be tested.

Right Ear

250 Hz*:	<input type="text" value=""/>
Masking Level:	<input type="text" value=""/>
A. 500 Hz*:	<input type="text" value="15"/>
Masking Level:	<input type="text" value=""/>
B. 1000 Hz:	<input type="text" value="15"/>
Masking Level:	<input type="text" value=""/>
C. 2000 Hz:	<input type="text" value="20"/>
Masking Level:	<input type="text" value=""/>
D. 3000 Hz:	<input type="text" value="65"/>
Masking Level:	<input type="text" value=""/>
E. 4000 Hz:	<input type="text" value="80"/>
Masking Level:	<input type="text" value=""/>
F. 6000 Hz:	<input type="text" value="100"/>
Masking Level:	<input type="text" value=""/>
G. 8000 Hz:	<input type="text" value="CNT"/>
Masking Level:	<input type="text" value=""/>

Right Pure Tone Average

Fletcher Average:	<input type="text" value=""/>
Avg Hz (A + B +C) / 3:	<input type="text" value="17"/>
Avg Hz (B+C+D+E) / 4:	<input type="text" value="45"/>

Audiogram Tab (Continued)

Acoustic Immittance

Acoustic Immittance -----> [Click Here](#)

Right Ear

PROBE (Right) Peak Pressure daPa :
Vea:

Peak static immittance

226 Hz:

Tympanogram Type:

Stimulus (Left)

Contralateral AR Thresholds
500:
1000:
2000:
4000:

Stimulus (Right)

Ipsilateral AR Thresholds
500:
1000:
2000:
4000:
PT Stenger:

Left Ear

PROBE (Left) Peak Pressure daPa :
Vea:

Peak static immittance

226 Hz:

Tympanogram Type:

Stimulus (Right)

Contralateral AR Thresholds
500:
1000:
2000:
4000:

Stimulus (Left)

Ipsilateral AR Thresholds
500: