TECHNICIANS USE ONLY

STATION

_____

(Check one)

❑ Baseline
❑ Annual
❑ STS Retest
❑ Other _____

COMPANY _____ **DIVISION** _____

LOCATION _____

PLANT _____

SS # OR EMPL ID # _____ ***NAME** _____
(Use Company Authorized Identifier) LAST FIRST INITIAL

SEX_____ **DATE OF BIRTH**_____ **DATE OF HIRE** _____
month / day / year

	LEFT EAR							RIGHT EAR									
Date and Time	500	1000	2000	3000	4000	6000	8000	500	1000	2000	3000	4000	6000	8000	Serial # Make Model	*Audiometer Calibration Date	*TESTER Name and Cert. No./ Date

DEPT.

***JOB**

SHIFT	*NOISE LEVEL	HP REQUIRED?

Update Otologic History

CIRCLE ALL THAT APPLY: ALSO PLEASE INDICATE NEXT TO THE APPROPRIATE ITEM, ONE OF THE FOLLOWING: R = RIGHT, L = LEFT B = BOTH, U = UNKNOWN

In the last twelve months:

10 EAR PAIN
11 DRAINING EAR
12 DIZZINESS/IMBALANCE
13 SEVERE RINGING IN EARS
14 SUDDEN HEARING LOSS
15 FLUCTUATING LOSS
16 FULLNESS/DISCOMFORT
17 HEARING PROTECTION DEVICE PROBLEMS
18 PRESCRIPTION DRUGS
19 HIGH BLOOD PRESSURE

In your lifetime:

20 SEEN MD FOR EARS
21 EAR SURGERY
22 UNCONSCIOUSNESS
23 WEARS HEARING AID
24 MUMPS
25 SCARLET FEVER
26 MEASLES
27 MENINGITIS
28 DIABETES
29 KIDNEY DISEASE

Miscellaneous:

31 ALLERGIES
33 HIGH NOISE PRIOR TO HEARING TEST
34 NO HEARING PROTECTION PRIOR TO HEARING TEST
35 HEAD COLD TODAY
36 MILITARY SERVICE
37 NOISY HOBBIES
38 LOUD MUSIC/HEADPHONES
39 FIREARMS/GUNS

WHEN WORKING IN HIGH NOISE AREA, DO YOU WEAR HEARING PROTECTION? YES ❑ NO ❑

(EXPLAIN CIRCLED ITEMS UNDER "COMMENTS")

IMPORTANT FOR COMPANY: Please fill out all information above heavy black lines in advance of mobile unit arrival. Hold this form for distribution to employees immediately prior to test. For test done in house or at local clinic, keep original for your files and make photocopy to send to T K Group for processing.

*** THIS INFORMATION IS REQUIRED BY OSHA.**

COMMENTS:

Employee Signature *Date

T K GROUP, INC.
HEARING CONSERVATION DIVISION
1781 S. BELL SCHOOL ROAD
CHERRY VALLEY, IL 61016
815-332-3460 (Phone)
815-332-5175 (Fax)

TKG/1PART-R-2
2/09