Are You a Candidate for **Balloon Sinuplasty?**

Please fill out this survey and hand it to the receptionist.

(Please use check mark)	No problem	Very mild problem	Mild problem	Moderate problem	Severe problem	Unbearable problem
Need to blow nose	0	1	2	3	4	5
Nasal Blockage	0	1	2	3	4	5
Sneezing	0	1	2	3	4	5
Runny nose	0	1	2	3	4	5
Cough	0	1	2	3	4	5
Post-nasal discharge	0	1	2	3	4	5
Thick nasal discharge	0	1	2	3	4	5
Ear fullness	0	1	2	3	4	5
Dizziness	0	1	2	3	4	5
Ear pain	0	1	2	3	4	5
Facial pain/pressure	0	1	2	3	4	5
Decreased sense of smell/taste	0	1	2	3	4	5
Difficulty falling asleep	0	1	2	3	4	5
Wake up at night	0	1	2	3	4	5
Lack of a good night's sleep	0	1	2	3	4	5
Wake up tired	0	1	2	3	4	5
Fatigue	0	1	2	3	4	5
Reduced productivity	0	1	2	3	4	5
Reduced concentration	0	1	2	3	4	5
Frustrated/restless/irritable	0	1	2	3	4	5
Sad	0	1	2	3	4	5
Embarrassed	0	1	2	3	4	5
TOTAL						

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SNOT-22 Developed from modification of SNOT-20 by National Comparative Audit of Surgery for Nasal Polyposis and Rhinosinusitis

Royal College of Surgeons of England.

WHAT IS SINUSITIS?

Over 30 million Americans suffer from Sinusitis.5



Sinuses are air-filled pockets behind the facial bones surrounding the nose. Each sinus has natural openings through which mucus drains.







Sinus

sinus lining often caused by infections and/or blockage of the sinus openings, altering normal drainage. When you have frequent sinusitis, or the infection lasts three months or more, it could be chronic sinusitis.

Sinusitis is an inflammation of the

For more information on Balloon Sinuplasty, visit www.BalloonSinuplasty.com

Sources:

- 1. Karanfilov, B., Silvers, S., Pasha, R., Sikand, A., Shikani, A., Sillers, M. and the ORIOS2 Study Investigators (2013). Office-based balloon sinus dilation: a prospective, multicenter study of 203 patients. Int Forum Allergy Rhinol, 3; 404-411.
- 2. Weiss, R.L., Church, C.A., Kuhn, F.A., Levine, H.L., Sillers, M.J. & Vaughan, W.C. (2008). Long-term outcome analysis of balloon catheter sinusotomy: Two-year follow-up. Otolaryngology-Head and Neck Surgery, 139; S38-S46.
- 3. Payne, S.C., Stolovitzky, P., Mehendale, N., et al. (2016). Medical therapy versus sinus surgery by using balloon sinus dilation technology: A prospective multicenter study. American Journal of Rhinology & Allergy, 30; 1-8.
- 4. Acclarent Procedural Data Documented on 7/17/2024
- 5. Rosenfeld, R.M., Piccirillo, J.F., Chandrasekhar, S.S., et al. (2015). Clinical Practice Guideline (Update): Adult Sinusitis. Otolaryngology - Otolaryngology-Head and Neck Surgery, 152(2S); S1-S39.

ACCLARENT® Balloon Sinuplasty Devices are intended for use by or under the direction of a physician. Acclarent Technology has associated risks, including unintended tissue injury, infection, or possible visual injury. Consult your physician for a full discussion of risks and benefits to determine whether this procedure is right for you.

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Balloon Sinuplasty technology by Acclarent, Inc.

Do you suffer from:

Pressure Fatique Congestion Loss of Smell Pain

GET YOUR LIFE BACK WITH BALLOON SINUPLASTY!



WHAT IS BALLOON SINUPLASTY?

Balloon Sinuplasty is used to relieve the pain and pressure associated with chronic sinusitis.

Balloon Sinuplasty (BSP) uses a small, flexible, balloon catheter to open up blocked sinus passageways to relieve pressure and pain in patients suffering from chronic sinusitis symptoms.

STEP 2

STEP 4

Open the Sinus

Durable Results



Access the Sinus



Irrigation

GET YOUR LIFE BACK.





96% of patients experience positive results.²



74% of patients chose Balloon Sinuplasty over medical management alone.³



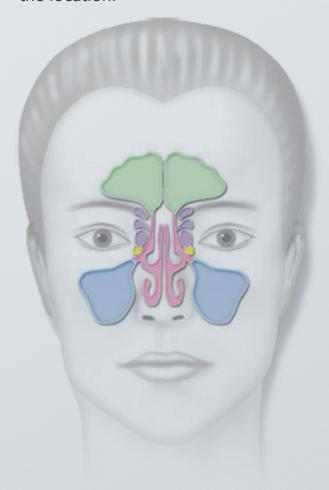
2-day recovery period.1



1.3M+
patients treated.4

Name:	Date:

Please indicate the location of your pain/pressure by placing an "X" on the location.



GET YOUR LIFE BACK!
A SIMPLE PROCEDURE
LASTING RELIEF

IS BALLOON SINUPLASTY RIGHT FOR YOU?

Minimally invasive with a strong safety profile.

Comfortable, familiar environment.

Some eligible patients may have lower out-of pocket costs if the procedure is performed in a doctor's office.¹

General anesthesia not required.1