



**Colorado Tinnitus
and Hearing Center, Inc.**
Connecting People With The Sounds of Life

Colorado Tinnitus & Hearing Center, Inc.
3601 South Clarkson Street, #220
Englewood, Colorado 80113
PH: 303.534.0163

Neuromod Medical Intake

Patient Name: _____ Date of Birth: _____

Do you have a pacemaker, defibrillator or any other active implantable device?

Yes _____ No _____

Are you pregnant or is there a chance that you are pregnant?

Yes _____ No _____

Do you have epilepsy or any other condition that may result in loss of consciousness?

Yes _____ No _____

Do you have any condition that causes impaired sensitivity of the tongue?

Yes _____ No _____

Do you have any lesions, sores, or inflammation of the oral cavity that could be in contact with the Tongue Tip (i.e., tip of tongue and lip area).

Yes _____ No _____

Do you have any Intermittent or chronic neuralgia in the head and neck area?

Yes _____ No _____

Do you have tinnitus caused by Meniere's disease? The use of this device has not been evaluated in the TENT clinical studies for Meniere's disease.

Yes _____ No _____

Do you have tinnitus confirmed to be from an objective source? Can others hear your tinnitus?

Yes _____ No _____

Do you have any oral piercings?

Yes _____ No _____

I have reviewed all the above health questions and have answered honestly. I do not hold Colorado Tinnitus and Hearing Center, Inc. liable for any questions that were not answered correctly.

Patient Signature: _____ Date: _____