

Name \_\_\_\_\_

# AM 232 AUDIOGRAM

Age \_\_\_\_\_ Sex \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Audiometer Model No. \_\_\_\_\_

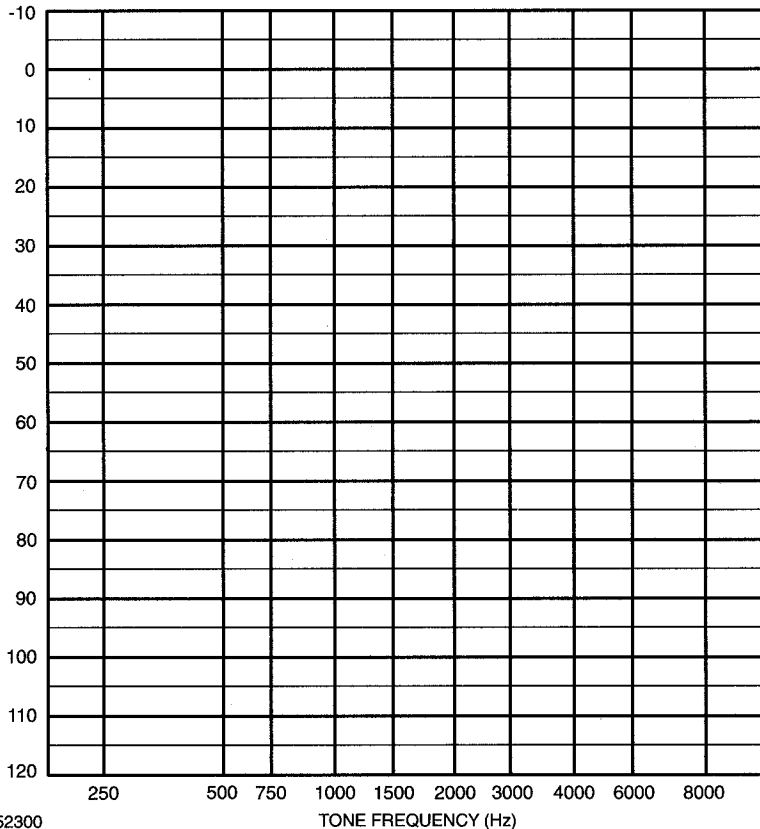
Job Description \_\_\_\_\_

Serial No. \_\_\_\_\_

Examiner \_\_\_\_\_

Signature \_\_\_\_\_

HEARING LEVEL IN DECIBELS  
ISO 389-1985 ANSI S3.6-1989



### SYMBOLS

Ear	Response	No Response	Phone
Left	X	X	Blue
Right	○	○	Red

COMMENTS