Dear \_\_\_\_\_,

Date \_\_\_\_\_

 Right:
 1000 Hz \_\_\_\_\_
 2000 Hz \_\_\_\_\_
 4000 Hz \_\_\_\_\_

 Left:
 1000 Hz \_\_\_\_\_
 2000 Hz \_\_\_\_\_
 4000 Hz \_\_\_\_\_

However, a classroom hearing survey completed by your child's teacher(s) does not indicate that your child is experiencing any difficulties hearing in the classroom.

Please observe if your child encounters any problems hearing outside of school. I will rescreen your child's hearing periodically throughout the school year, and will contact you if I see any noticeable improvement or decline in your child's hearing.

Please contact me if you have any questions.

Sincerely,

ESU 8 School Nurse