

		MARK ACTUAL DATE IN SQUARES BELOW												Mark intervention (eg new drug) onset with arrow																		
Month		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Severity																																
Severe	4																															
Mod-Severe	3																															
Moderate	2																															
Mild	1																															
Absent	0																															

Month 1 NAME

<b>Left Ear</b>																																
Change in Ringing																																
Fullness																																
Change in hearing																																
<b>Right Ear</b>																																
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<b>Warning signs</b>																																
Headache ..where?																																
Lights uncomfortable																																
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Month 2

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Month 3

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**Bance Dizziness Diary**

# Instructions for Bance Dizziness Diary

- This sheet has enough for approximately 3 month of dizziness recording, in 3 rows
- Put your name on the side of sheet
- First write the month in section marked month, and the date in each column as indicated
- Mark on the sheet with a firm Dot or Circle the severity of the dizziness on each day in the month
- Mark every day, even the days you don't have dizziness
- If there is more than one type of dizziness, separate them by marking the first type with a 1 instead of a dot, and the second type with a 2 instead of a dot etc
- Mark the associated symptoms during the dizziness in the same column as the dizziness day
- If the associated symptoms only occur, for instance, in the left ear, leave the right ear boxes blank
- If associated symptoms occur without dizziness, mark them down as well.

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