

# Is Nasal Airway Obstruction (NAO) Adversely Affecting Your Daily Life?



Name: \_\_\_\_\_

Date: \_\_\_\_\_

Next to each question, enter the number that best describes how you feel.

Over the past one month, how much of a problem were the following conditions for you?

Not a problem    Very mild problem    Moderate problem    Fairly bad problem    Severe problem

Nasal congestion or stuffiness

0    1    2    3    4

Nasal blockage or obstruction

0    1    2    3    4

Trouble breathing through my nose

0    1    2    3    4

Trouble sleeping

0    1    2    3    4

Unable to get enough air through my nose during exercise or exertion

0    1    2    3    4

**NOSE score (multiply your total score x5):**

Nasal obstruction severity classification:

mild	5-25
moderate	30-50
severe	55-75
extreme	80-100

After you've filled this survey out, please bring it to your doctor to discuss the results and your specific symptoms

Lipan MJ1, Most SP. Development of a severity classification system for subjective nasal obstruction. *JAMA Facial Plast Surg.* 2013 15(5):358-61.

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