

# 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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