



Sin-Nasal Outcome Test (SNOT-20):

Note: this is a 20-question survey for patients to fill out for any nose or sinus issues

Patient rates the severity of their condition on each of the 20 items using a 0-5 category rating system: On a scale of 0 to 5, rate your symptoms

- 0 = no problem
- 1 = very mild problem
- 2 = mild or slight problem
- 3 = moderate problem
- 4 = sever problem
- 5 = problem as bad as it can be

Sin-Nasal Outcome Test (SNOT-20):	0	1	2	3	4	5
1 Need to blow nose	0	1	2	3	4	5
2 Sneezing	0	1	2	3	4	5
3 Runny nose	0	1	2	3	4	5
4 cough	0	1	2	3	4	5
5 post nasal drainage	0	1	2	3	4	5
6 thick nasal drainage	0	1	2	3	4	5
7 ear fullness	0	1	2	3	4	5
8 dizziness	0	1	2	3	4	5
9 ear pain	0	1	2	3	4	5
10 facial pain or pressure	0	1	2	3	4	5
11 difficulty falling asleep	0	1	2	3	4	5
12 wakes up at night	0	1	2	3	4	5
13 lack of sleep	0	1	2	3	4	5
14 wake up tired	0	1	2	3	4	5
15 fatigue	0	1	2	3	4	5
16 reduced productivity	0	1	2	3	4	5
17 reduced concentration	0	1	2	3	4	5
18 frustrated/restless/irritable	0	1	2	3	4	5
19 sad	0	1	2	3	4	5

20 embarrassed	0	1	2	3	4	5
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Now go back and circle the 5 most important bothersome symptoms. Print and bring to your next appointment as this helps us follow your progress and compare it to health industry standards and outcomes management.