kodama

# Hyperacusis — Daily Sound Diary (Modules 1–4)

During Modules 1–4, use this diary once a day to record one everyday sound moment. The goal is not to grade loudness or deliberately expose yourself to sound. It is to notice patterns: what was happening, what your mind and body did, what you avoided or adjusted, and where pain—if present—showed up.

About distress ratings (SUDS)

Use a 0–100 scale to estimate distress, discomfort, or activation in the moment: 0 = completely calm and 100 = the most distress you can imagine. A gut estimate is enough; use your own experience as the reference.

Do not deliberately practice with difficult sounds yet. Planned exposure begins in Module 5. Do not push through pain. If a sound causes pain or leaves you noticeably worse afterward, note it and tell your coach at the check-in.

## Daily Sound Moment

### When did this happen?

Example: “Tuesday around 6:30 p.m.”

### What sound or situation did you encounter?

Example: “Dishes clattering while I made dinner.”

### What was happening around you?

Example: “I was tired after work and the kitchen was busy.”

### Distress before the sound moment (SUDS 0–100)

How distressed or activated did you feel just before it began?

**Highest distress during the sound moment (SUDS 0–100)**

What was the highest level you reached?

**Distress after the sound moment (SUDS 0–100)**

How did you feel shortly after the sound ended or you left the situation?

**Did you experience physical pain?** ◯ Yes ◯ No

Pain is different from discomfort, distress, fear, or annoyance.

**Highest pain level (0–10)**

**Did the pain continue after the sound ended?** ◯ Yes ◯ No

**Approximately how long did the pain continue?**

Example: “A few minutes,” “about two hours,” or “still present.”

**Did you use hearing protection, leave, avoid the sound, or make another adjustment?**

Example: “Used earplugs,” “moved farther away,” “lowered the volume,” or “left the room.”

**What went through your mind?**

Example: “This will hurt for the rest of the day,” or “I need to get away immediately.”

## **For Planned Practice Only**

**How did your distress change during or after the experience?**

- ◯ Decreased
- ◯ Stayed about the same
- ◯ Increased
- ◯ Varied
- ◯ Not sure

**What did you learn or notice?**

Example: “The anticipation was worse than the sound,” or “Starting farther away made it manageable.”

**Did your symptoms remain noticeably worse after the experience?**

Help text: “For example, increased pain or sound sensitivity that continued beyond the usual recovery period.”

**Additional Notes**