Sound Sensitivity Assessment Feedback

Date: [Insert Date]

Recipient Name: [Insert Recipient Name]

Recipient Address: [Insert Recipient Address]

Dear [Recipient Name],

We appreciate your participation in the sound sensitivity assessment conducted on [Insert Date of Assessment]. This letter aims to provide you with the feedback regarding your results.

Assessment Overview

Your responses during the assessment indicated the following key points:

• Level of sound sensitivity: [Insert Level]

• Specific triggers: [Insert Triggers]

• Impact on daily life: [Insert Impact]

Recommendations

Based on the assessment findings, we recommend the following strategies to help manage your sound sensitivity:

- [Insert Recommendation 1]
- [Insert Recommendation 2]
- [Insert Recommendation 3]

Follow-Up

We encourage you to schedule a follow-up appointment to discuss your results and any necessary interventions in greater detail. Please contact us at [Insert Contact Information] to arrange a convenient time.

Thank you for your cooperation and openness during the assessment process. We are here to support you in managing your sound sensitivity effectively.

Sincerely,
[Your Name]
[Your Title]
[Your Organization]
[Contact Information]