

## Supplementary Material

### The survey questionnaire pertaining to the relationship between earphone use and external ear infections

#### 1. General Information

1) What is your sex?

- Male
- Female
- Unknown

2) What month and year were you born?

\_\_\_\_\_ / \_\_\_\_\_ (i.e., September / 1988)

#### 2. Earphone Use

Have you used earphones within the last month?

- No
- Yes

[If no] *Please answer the following open-ended question:*

What is the reason that you did not use earphones?

\_\_\_\_\_

[If yes] *Please proceed to answer the following questions:*

1) How often do you replace your earphone?

- Every 3 months
- Every 6 months
- Every year
- Only when they break
- When I want to change
- Other \_\_\_\_\_

- 2) What is the brand and model of the earphones that you are currently using?  
Brand \_\_\_\_\_ / Model \_\_\_\_\_ (i.e., Brand Apple / Model AirPods3)
- 3) What type (s) of earphones are you currently using?
- Open type
  - Canal type
  - Clip type
  - Others \_\_\_\_\_
- 4) What type of ear tip do your earphones have?
- No applicable
  - Package type
  - Silicone type
  - Comply foam type
  - Others \_\_\_\_\_
- 5) What is the total duration of your current earphone use?  
\_\_\_\_\_ months (If it is one year, please write 12 months.)
- 6) What is your current daily earphone usage time?  
\_\_\_\_\_ hours/day (If it is 30 minutes, please write 0.5 hours.)
- 7) What is the most frequent activity for which you use earphone?
- Consuming media (music, video, podcast, etc.)
  - Audio/video calls
  - Consuming media during exercise
  - Noise cancellation
  - Other \_\_\_\_\_
- 8) Do you feel pain when you wear your earphones for a long time?
- Never
  - Rarely
  - Sometimes
  - Often
  - Very often
- 9) Do your earphones easily fall off/out of your ears when you wear them and move around?

- Never
- Rarely
- Sometimes
- Often
- Very often

### 3. External ear Infection

1) Have you ever had an external ear infection (also known as swimmer's ear)?

- No
- Yes

2) Are you currently experiencing any symptoms of an external ear infection?

- No
- Yes

[If yes] *Please check all the symptoms that you are currently experiencing:*

- Pain
- Itching
- Redness
- Discharge
- Others \_\_\_\_\_

3) Have you cleaned your earphones within the last month?

- No
- Yes

[If yes] *How often do you clean your earphones?*

- Every day
- Every week
- Every month
- Never cleaned it before
- Other \_\_\_\_\_

4) Have you ever shared your earphones with someone else?

- Never
- Rarely

- Sometimes
- Often
- Very often

5) Do you typically use earphones for extended periods of time (i.e., longer than 1 hour at a time)?

- Very unlikely
- Unlikely
- Neutral
- Likely
- Very likely

6) Do you use earphone while exercising or engaging in physical activity that may cause you to sweat?

- Very unlikely
- Unlikely
- Neutral
- Likely
- Very likely

7) Have you ever had a bacterial or fungal infection (i.e., athlete's foot, jock itch)?

- No
- Yes

8) Have you been diagnosed with perforation of eardrum or otitis media within the last month?

- No
- Yes

9) Have you ever been diagnosed with otitis media or had surgery for otitis media in the past?

- No
- Yes

10) Have you used cotton swabs or ear picks to clean your ears within the last month?

- Very unlikely

- Unlikely
- Neutral
- Likely
- Very likely

11) Do you think the use of earphones affects the occurrence of external ear infection?

- Strongly disagree
- Disagree
- Neither agree or disagree
- Agree
- Strongly agree