



Tinnitus Handicap Inventory

Instructions: The purpose of this questionnaire is to identify problems your tinnitus may be causing you. Check **Yes**, **Sometimes**, or **No** for each question. Do not skip a question.

		Yes (4)	Sometimes (2)	No (0)
1F	Because of your tinnitus is it difficult for you to concentrate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2F	Does the loudness of your tinnitus make it difficult for you to hear people?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3E	Does your tinnitus make you angry?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4F	Does your tinnitus make you feel confused?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5C	Because of your tinnitus do you feel desperate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6E	Do you complain a great deal about your tinnitus?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7F	Because of your tinnitus do you have trouble falling to sleep at night?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8C	Do you feel as though you cannot escape your tinnitus?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9F	Does your tinnitus interfere with your ability to enjoy social activities (such as going out to dinner, to the movies)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10E	Because of your tinnitus do you feel frustrated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11C	Because of your tinnitus do you feel that you have a terrible disease?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12F	Does your tinnitus make it difficult for you to enjoy life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13F	Does your tinnitus interfere with your job or household responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14F	Because of your tinnitus do you find that you are often irritable?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15F	Because of your tinnitus is it difficult for you to read?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16E	Does your tinnitus make you upset?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17E	Do you feel that your tinnitus problem has placed stress on your relationship with members of your family and friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18F	Do you find it difficult to focus your attention away from your tinnitus and on other things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19C	Do you feel that you have no control over your tinnitus?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20F	Because of your tinnitus do you often feel tired?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21E	Because of your tinnitus do you feel depressed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22E	Does your tinnitus make you feel anxious?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23C	Do you feel that you can no longer cope with your tinnitus?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24F	Does your tinnitus get worse when you are under stress?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25E	Does your tinnitus make you feel insecure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total		___	___	___

F denotes an item on the functional subscale; E, an item on the emotional subscale; and C, an item on the catastrophic response subscale.

Newman, C. W., Jacobson, G. P., & Spitzer, J. B. (1996). Development of the Tinnitus Handicap Inventory. *Archives of Otolaryngology—Head and Neck Surgery*, 122, 143–148.