



TINNITUS QUESTIONNAIRE

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PATIENT NAME (PLEASE PRINT)

PATIENT DATE OF BIRTH

Please choose the correct response to each question:

1. When did your ear noise (tinnitus begin)?
 - A few days ago
 - About a week ago
 - About a month ago
 - Several months ago
 - About a year ago
 - Several years ago or more
2. Was there an illness, accident or other incident that was associated with the onset of tinnitus?
 - Yes
 - No
3. In which ear do you hear it?
 - Right
 - Left
 - Both
 - Sometimes one ear and sometimes the other
4. The noise is:
 - Constant
 - Intermittent
5. If intermittent, it is heard about _____% of the time
 - How would you describe the character of the ear noise?
 - Ringing
 - Roaring or ocean roar
 - Hissing
 - Buzzing
 - Pulsating
 - Like the blood flow from my heart beating
 - Clicking
 - Thumping
 - Other: _____
6. Since its onset, the tinnitus volume has:
 - Increased
 - Decreased
 - Remained the same
7. Do you have any of the following problems?
 - Hearing loss
 - Dizziness
 - Headaches
 - Diabetes
 - Thyroid problems
 - Jaw pain
 - Ear problems other than tinnitus
 - Hearing your voice or breathing echoing in your ear
 - None
8. Do you notice that tinnitus is caused by or changes with any of the following?
 - Tobacco use
 - Caffeine
 - Aspirin
 - Alcohol
 - Other anti-inflammatory medications such as Motrin or Aleve
 - Stress
 - Change in body position
 - Other: _____
9. Tinnitus is
 - Mildly annoying
 - Moderately annoying
 - Very annoying
 - Intolerable

/Please complete both sides

10. Tinnitus

- Interferes with sleep
- Interferes with work or other daily activities

11. How would you rate the degree to which tinnitus affects your life?

- It causes little or no interference with work or social activities
- It causes some interference, but I can live with it
- It takes considerable effort to maintain normal work and social activities
- It renders me unable to perform any work or social activities

12. What evaluation have you had for tinnitus?

13. Have you had a recent hearing test?

- Yes
- No

14. What treatments have you tried for tinnitus?

*****THANK YOU!*****