

Tinnitus Handicap Inventory (THI)

Name: _____ Date: _____

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

To be completed by clinician

Totals: _____

THI Score: (number of "yes" x 4) (number of "sometimes x2) =

Total Score: _____

0-16 Slight (Only heard in quiet environments)

18-36 Mild (Easily masked by environmental sounds and activities)

38-56 Moderate (Noticed in the presence of background noise, although activities can still be performed)

58-76 Severe (Almost always heard, leads to disturbed sleep patterns and can interfere with daily activities)

78 - 100 Catastrophic (Always heard, disturbed sleep patterns, difficulty with any activities)