



Tinnitus Handicap Inventory (THI)

Instructions:

The purpose of this questionnaire is to identify difficulties that you may be experiencing because of your tinnitus.

		Yes	Sometimes	No
1	Because of your tinnitus, is it difficult for you to concentrate?	4	2	0
2	Does the loudness of your tinnitus make it difficult for you to hear people?	4	2	0
3	Does your tinnitus make you angry?	4	2	0
4	Does your tinnitus make you feel confused?	4	2	0
5	Because of your tinnitus, do you feel desperate?	4	2	0
6	Do you complain a great deal about your tinnitus?	4	2	0
7	Because of your tinnitus, do you have trouble falling to sleep at night?	4	2	0
8	Do you feel as though you cannot escape your tinnitus?	4	2	0
9	Does your tinnitus interfere with your ability to enjoy your social activities (such as going out to dinner, to the movies)?	4	2	0
10	Because of your tinnitus, do you feel frustrated?	4	2	0
11	Because of your tinnitus, do you feel that you have a terrible disease?	4	2	0
12	Does your tinnitus make it difficult for you to enjoy life?	4	2	0
13	Does your tinnitus interfere with your job or household responsibilities?	4	2	0
14	Because of your tinnitus, do you find that you are often irritable?	4	2	0
15	Because of your tinnitus, is it difficult for you to read?	4	2	0
16	Does your tinnitus make you upset?	4	2	0



	Yes	Sometimes	No
17	4	2	0
18	4	2	0
19	4	2	0
20	4	2	0
21	4	2	0
22	4	2	0
23	4	2	0
24	4	2	0
25	4	2	0

Developer Reference:

Newman, C. W., Jacobson, G. P., & Spitzer, J. B. (1996). Development of the Tinnitus Handicap Inventory. *Archives of Otolaryngology--Head & Neck Surgery*, 122(2), 143–148. <https://doi.org/10.1001/archotol.1996.01890140029007>

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