Tinnitus Screener  
Patient self-administered version

Tinnitus is ringing, buzzing, humming or other noises in your ears or head.

During the PAST YEAR:

1. Have you experienced tinnitus lasting more than 2 - 3 minutes?
   - NO: STOP HERE
   - YES: GO TO #2

2. Have you experienced tinnitus for at least 6 months?
   - NO: GO TO #3
   - YES: GO TO #3

3. In a quiet room, can you hear tinnitus?
   - Always: STOP HERE
   - Usually: STOP HERE
   - Sometimes/Occasionally: GO TO #4

4. When you heard tinnitus this past year, was it caused by a recent event? (Examples: loud concert, head cold, allergies, some medications)
   - NO: GO TO #6
   - YES, Sometimes: GO TO #5
   - YES, Always: STOP HERE

5. Does your tinnitus seem to "come and go" on its own, in addition to being caused by a recent event(s)?
   - NO: STOP HERE
   - YES: GO TO #6

6. Do you experience tinnitus on a:
   - Daily or weekly basis: STOP HERE
   - Monthly or yearly basis: STOP HERE