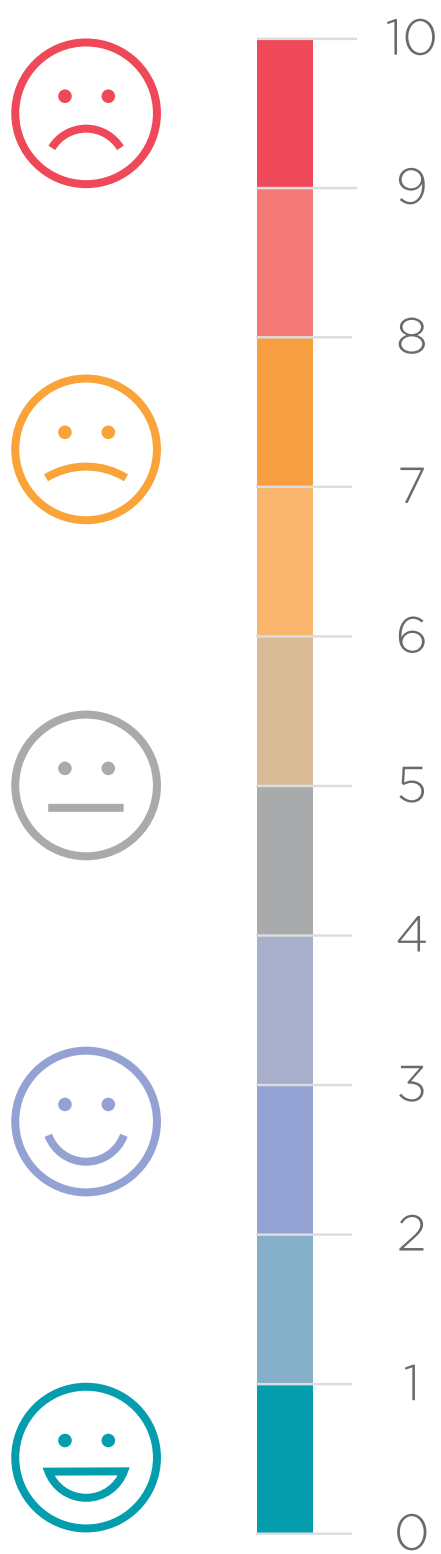


# TINNITUS THERMOMETER

















10 = Worst possible tinnitus  
0 = No tinnitus

# TINNITUS THERMOMETER

CLIENT'S NAME: \_\_\_\_\_



	DATE: <input type="text"/> REF: <input type="text"/>	DATE: <input type="text"/> REF: <input type="text"/>	DATE: <input type="text"/> REF: <input type="text"/>
1 When you think of tinnitus, what do you think of? Say one or two words that describes how you <b>feel</b> about it.			
2 What do you expect from this appointment?			
3 During the past week, was there a time when your tinnitus was less bothersome?			
4 Mark the number between 0-10 that best describes how much tinnitus has bothered you in the past week, including today.  0 = No tinnitus 10 = Worst possible tinnitus	<div><div></div><div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div><div>0 1 2 3 4 5 6 7 8 9 10</div></div>	<div><div></div><div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div><div>0 1 2 3 4 5 6 7 8 9 10</div></div>	<div><div></div><div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div><div>0 1 2 3 4 5 6 7 8 9 10</div></div>