

## Index

A	Tinnitus Handicap Inventory (THI), 41–42 Tinnitus Problem Checklist, 44–45
Alcohol intake, 47, 48	Audiology, 24
Aminoglycoside antibiotics, 5	Individualized Support protocol, 77–79
Amitryptiline, 48	patient education, 26
Amphetamine abuse, 47	triage to, 37
Antidepressants, 48	Auditory imagery, 4
Anxiety, 47, 48, 69	, , ,
Anxiolitics, 48	B
Appendixes. See Forms	В
Aspirin, 5, 48	Bipolar disorder, 47
Assessment. See also Audiologic Evaluation;	1
Interdisciplinary Evaluation	6
mental health, 67–70	С
psychoacoustic, 72–73	Caffeine intake, 5, 48
Attention-deficit/hyperactivity disorder, 47	Case studies/patient examples
Attention Scale, 61, 129–130	bilateral intermittent tinnitus, 32–33
Audiologic Evaluation	bothersome tinnitus, 33
auditory function assessment, 42–43	CBT (cognitive-behavioral therapy), 81
and candidacy for Group Education, 40	hearing loss/tinnitus, 32
Ear-Level Instrument Assessment/Fitting	Individualized Support, 81
Flowchart, 45, 113	phonophobia, 33
hearing aid evaluation, 45-47 (See also Hearing	PTSD, 33
aids main entry)	sensorineural hearing loss, 41
Hearing Aid Special Considerations, 46, 115	CBT (cognitive-behavioral therapy)
Hearing Handicap Inventory, 42	case study, 81
and hyperacusis, 40, 41	clues for tinnitus management, 3
LDLs, 53	extended support option, 81-82
and mental health referral, 47	Group Education, 63–66 (See also Group Education
objectives overview, 39, 99	main entry)
otolaryngology exam need assessment, 43	Individualized Support, 80–81, 82
otoscopy, 42	and individualized support level, 30
overview, 27, 49	and patient education, 25, 31
patient example: sensorineural hearing loss, 41	in PTM foundational research, 17, 18–19
procedures overview, 39, 99	and STEM, 29, 55
pure-tone threshold evaluation, 42–43	telephone-based, 18
sleep disorder referral assessment, 47–48	CD/DVD: Managing Your Tinnitus, 151–152
somatosounds assessment, 43-44	Changing Thoughts and Feelings Worksheet, 64
suprathreshold audiometric testing, 43	Chemotherapy, 5, 48
THI (Tinnitus Handicap Inventory), 41–42, 105–	Chronic tinnitus, 2. See also Tinnitus
106, 107	Cisplatin, 5
THS (Tinnitus and Hearing Survey), 39–41, 101	Clinical data of patients (tinnitus), 8–9

Clinical trial candidacy, 12–13 Cocaine abuse, 47 Cochlear cellular stress responses, 36 Cognitive-behavioral therapy (CBT). See CBT (cognitive-behavioral therapy) Cognitive restructuring, 65–66 Combination Instrument In-Clinic Trial Use, 75, 147 Conductive tinnitus, 6, 7 Corticosteroids, 36	Sound Plan Worksheet, 125–126 Sound Tolerance Interview, 117–119 Sound Tolerance Worksheet, 121–122 Tinnitus and Hearing Survey, 101 Tinnitus Contrast Activity, 62, 131–132 Tinnitus Handicap Inventory, 105–106 Tinnitus Handicap Inventory: Screening Version, 107 Tinnitus Interview: Interdisciplinary Evaluation,
D Depression, 47, 69 Diuretics, 5, 48 DVD/CD: Managing Your Tinnitus, 151–152	133–136 Tinnitus Problem Checklist, 111 Tinnitus Triage Guidelines, 97 What to Do When Everyday Sounds Are Too Loud (without hearing aids), 103–104 Foundational research assessment protocol development, 15
Ear-Level Instrument Assessment/Fitting Flowchart, 45, 46, 70, 74, 113  Ear-Level Instrument In-Clinic Trial Use, 145  Ear-Level Instrument Trial Use Guide, 75, 143  Ear noise, transient, defined, 1–2  Education. See Group Education  Epidemiology, 6  Epworth Sleepiness Scale, 69, 141  Etiology of tinnitus, 6  Evaluation. See Audiologic Evaluation  Examples. See Case studies/patient examples	and ATM (audiologic tinnitus management), 14 and clinical trial candidacy, 12–13 educational component need, 14 efficacy: TM versus TRT, 12–13 efficacy: TM versus TRT, veterans, 14–15 group intervention, 13–14 and multidisciplinary team, 17–18 overview, 12, 19 paths can differ for management, 12 and psychological concerns, 17–18 and self-help workbook (PTM), 14, 17, 18 sound attention diversion, 14 studies first, 12–13 second, 13–14
Forms Attention Scale, 129–130 Audiologic Evaluation objectives/procedures overview, 99 Combination Instrument In-Clinic Trial Use, 147 Ear-Level Instrument Assessment/Fitting Flowchart, 113 Ear-Level Instrument In-Clinic Trial Use, 145 Ear-Level Instrument Trial Use Guide, 75, 143 Epworth Sleepiness Scale, 141 Hearing Aid Special Considerations, 115 Hospital Anxiety and Depression Scale (HADS), 137–138 Loudness Discomfort Levels—Clinical Guide, 123 Noise Generator In-Clinic Trial Use, 149 Primary Care PTSD Screening Tool (PC-PTSD), 139 PTM Flowchart, 95 Relief Scale, 127–128	third, 14–15 fourth, 15–17 fifth, 17–18 TBI: veterans, 17–18 and telephone-based administration, 17 and therapeutic sound, 14, 18 veterans, 14–18  G Glucocorticoids, 36 Group Education first session, 59–63 second session, 63 attention diversion, 65 Attention Scale, 61, 129–130 audiologist-conducted workshops and Attention Scale, 61 background sound type taught, 61 demonstration of sound types, 61–62

individualized sound plan development, 59	HHIE-S (Hearing Handicap Inventory for the
interesting sound type taught, 60–61	Elderly-Screening), 42, 109
and Relief Scale, 61	Hospital Anxiety and Depression Scale (HADS), 69,
soothing sound type taught, 60	137–138
Sound Plan Worksheet, 57, 59, 60, 62, 64	How to Manage Your Tinnitus (J.A. Henry et al.), 27–
sound types taught, 60–61	28, 40, 45, 48, 58, 78. See also Patient self-help
THS (Tinnitus and Hearing Survey) review,	workbook main entry
59–60, 101	Hyperacusis, 33. See also Loudness recruitment;
Tinnitus Contrast Activity, 62	Misophonia; Phonophobia; Sound Tolerance
candidacy, 40	Interview (STI); STEM (sound tolerance
CBT (cognitive-behavioral therapy)	evaluation and management)
essential componments, 64	defined, 9
overview, 63–64	Loudness Discomfort Levels—Clinical Guide, 123
Session 1, 64–65	screening for, 27, 28
Session 2, 65–66	Sound Tolerance Interview form, 117–119
Session 3, 66	sound tolerance management approach, 40
Changing Thoughts and Feelings Worksheet,	Sound Tolerance Worksheet, 52, 121–122
64	therapy for, 10, 37, 52, 82–83
cognitive restructuring, 65–66	What to Do When Everyday Sounds Are Too Loud
collaborative self-management, 58, 66 continuity with Interdisciplinary Evaluation, 76	(without hearing aids), 40, 41, 52, 103–104
follow-up, 66	Hypersensitivity to sound. See Hyperacusis
overview, 28–29, 66	
patient self-help workbook, 58	I
pleasant activities for diversion, 65	Idiopathic sudden sensorineural hearing loss
psychologist-conducted workshops	(ISSHL), 36, 37
overview, 63–66'	Individualized Support
relaxation techniques, 65, 151	appointments' process, 77–79
Relief Scale, 61	audiologist standard protocol, 77–79
sound grid use, 62	augmentative sound, 80
stress reduction, 64–65	CBT (cognitive-behavioral therapy), 80–81, 82
therapeutic sound use education, 58-59	counseling, 79–80
Tinnitus Contrast Activity, 131–132	criteria for progress from Interdisciplinary
Tinnitus Problem Checklist, 60-62, 64, 66	Evaluation, 76
	extending intervention, 79
н	NTT (neuromonics tinnitus treatment) extended
	support, 83
Hallucinations (auditory/musical), 4–5	overview, 77, 83–84
Hallucinogen abuse, 47	patient self-help workbook, 79
Health literacy, 26	personal listening devices, 80
Hearing aids	Sound Plan Worksheet, 77, 79
needed for PTM, 45–46	stationary sound devices, 80
and tinnitus, 46–47	telephone counseling, 79
tinnitus management reaction, 46	THS (Tinnitus and Hearing Survey), 77–78, 101
Hearing Aid Special Considerations, 46, 115	Tinnitus Handicap Inventory (THI), 77–78
Hearing Handicap Inventory for the Elderly-	Tinnitus Interview: Interdisciplinary Evaluation,
Screening (HHIE-S), 42, 109	78 TM (tippitus masking) ovtended support 82
Hearing loss, 7	TM (tinnitus masking) extended support, 82
case study, 32 idiopathic sudden sensorineural hearing loss	TRT (tinnitus retraining therapy) extended support, 82–83
(ISSHL), 36, 37	Individualized support
sensorineural, 41	overview, 30–31
	2.22.10.1, 20 22

Insomnia, 47, 48, 69, 70 Interdisciplinary Evaluation anxiety screening, 69 BTE (behind-the-ear) instrument in-clinic trials, 75–76	Loudness Discomfort Levels—clinical guide, 123 Loudness discomfort levels (LDL), 10, 52–53 Loudness recruitment. <i>See also</i> Hyperacusis defined, 9–10, 54 treatment, 10
Combination Instrument In-Clinic Trial Use, 75, 147 continuity with Group Education, 76 criteria for progress to Individualized Support, 76	<b>M</b> <i>Managing Your Tinnitus</i> , 59, 80, 151–152
depression screening, 69 Ear-Level Instrument Assessment/Fitting Flowchart, 70, 74, 113 ear-level instrument follow-up, 76	Managing Your Tinnitus (DVD/CD), 151–152 Marijuana use, 47 Masking. See TM (tinnitus masking) Masking as term, 60. See also TM (tinnitus masking)
Ear-Level Instrument In-Clinic Trial Use, 74–76, 145 Ear-Level Instrument Trial Use Guide, 75, 143 forms for in-clinic ear-level trials, 75 Hospital Anxiety and Depression Scale (HADS),	Medications aminoglycoside antibiotics, 5 amitryptiline, 48 antibiotics, 5 antidepressants, 48
69, 137–138 interview administration, 70–72 Noise Generator In-Clinic Trial Use, 75, 149 noise generators for in-clinic trials, 75 nonmental health clinician screening, 68–69	anxiolitic, 48 aspirin, 5, 48 chemotherapy, 5, 48 cisplatin, 5 corticosteroids, 36
overview, 29–30, 67 PC-PTSD (Primary Care PTSD) screening tool, 69 psychoacoustic assessment, 72–73 PTSD (posttraumatic stress disorder), 69	diuretics, 5, 48 glucocorticoids, 36 loop diuretics, 5, 48 lorazepam, 48
sleep disorders, 69–70 Sound Plan Worksheet, 72, 76 THS (Tinnitus and Hearing Survey), 70, 74, 101 Tinnitus Handicap Inventory (THI), 70, 105–106, 107	NSAIDs (nonsteroidal antiinflammatory drugs), 5, 48 quinine, 5, 48 Mental health professionals referral to, 47
Tinnitus Interview, 67, 70, 74, 78, 133–136 Intervention Group Education overview, 26–27 ( <i>See also</i> Education <i>main entry</i> ; Group Education <i>main</i>	on team, 24–25 triage to, 24–25 Misophonia. <i>See also</i> Hyperacusis in case history, 33 defined, 9, 54
entry) ISSHL (idiopathic sudden sensorineural hearing loss), 36, 37	and evaluation, 28 treatment, 10
L	N
Labyrinthine membrane ruptures, 36 Labyrinthitis, 36 LDL (loudness discomfort level). See loudness discomfort levels (LDL) Level 1. See Triage main entry Level 2. See Audiologic Evaluation main entry Level 3. See Individualized Support main entry	Narcolepsy, 69, 70 NCRAR (National Center for Rehabilitative Auditory Research), 19, 22 Neuro-otologology, 24 Noise Generator In-Clinic Trial Use, 75, 149 Nonpulsatile tinnitus, 2, 43, 44 Nonsteroidal antiinflammatory drugs (NSAIDs), 5
Level 4. <i>See</i> Interdisciplinary Evaluation <i>main entry</i> Loop diuretics, 5, 48 Lorazepam, 48	NSAIDs (nonsteroidal antiinflammatory drugs), 5, 48 NTT (neuromonics tinnitus treatment), 83

0	clinical service progressivity, 22–23
Ol	collaborative self-management, 26, 58, 66
Obsessive-compulsive disorder, 47	efficiency of, 22
Opiate abuse, 47	five levels of, 22, 23
Otolaryngology, 24	flowchart, 26, 36, 41, 52, 95
referral to criteria, 43–44	foundational research, 11-19 (See also
triage to, 36, 37	Foundational research main entry for details)
Ototoxicity, 48	and hearing needed for participation, 45-46
	hierarchical approach, 22, 23
P	interdisciplinary approach, 24–25
r	intervention (See Intervention main entry)
Panic episodes, 47	levels' overview, 26–30 (See also Triage,
Pathophysiology of tinnitus, 7–8	Audiologic Evaluation, Group Education,
Patient clinical data (tinnitus), 8–9	Interdisciplinary Evaluation, Individualized
Patient examples. See Case studies/patient examples	Support main entries for details)
Patient self-help workbook	mental health professionals on team, 24–25
Group Education, 58	neuro-otologists on team, 24
Individualized Support, 79	otolaryngologists on team, 24
overview, 27–28	overview, 21–34, 31–32
timing of distribution, 48–49	and prosthetics, 25 (See also Prosthetics main
PC-PTSD (Primary Care PTSD) screening tool.	entry)
See Primary Care PTSD Screening Tool	PTSD (posttraumatic stress disorder), 24, 47 (See
(PC-PTSD)	also PTSD (posttraumatic stress disorder)
Phobias, 47	main entry)
Phonophobia. See also Hyperacusis; Sound Tolerance	reaction to tinnitus management, 21-22
Interview (STI); STEM (sound tolerance	sleep disturbances, 25–26 (See also Sleep
evaluation and management)	disturbances main entry)
in case study, 33	sound tolerance management approach, 40
defined, 9	PTSD (posttraumatic stress disorder), 24
and LDL, 53	case study, 33
Loudness Discomfort Levels—Clinical Guide, 123	and psychologist group sessions, 63
Sound Tolerance Interview form, 117–119	referral for, 47
Sound Tolerance Worksheet, 52, 121–122	screening, 69
treatment, 10	Pulsatile tinnitus
What to Do When Everyday Sounds Are Too Loud	Audiologic Evaluation, 43–44
(without hearing aids), 40, 41, 52, 103–104	causes, 44
Prevalence of tinnitus, 6	clinical presentation, 43
Primary Care PTSD Screening Tool (PC-PTSD), 69,	defined, 2, 44
139	differential diagnosis, 24
Progressive Tinnitus Management: Counseling Guide	site of, 24
(J.A. Henry et al.), 31, 52, 67, 79	and surgery, 44
Prosthetics, 25	and triage, 37
Psychotic disorders, 47	
PTM (progressive tinnitus management)	Q
assessment as starting point, 26 (See also	¥
Audiologic Evaluation main entry;	Quinine, 5, 48
Interdisciplinary Evaluation main entry; Triage	
main entry)	R
audiologists on team, 24	11
basic premises, 21–26	Relaxation techniques, 65, 151
and CBT (cognitive-behavioral therapy (See CBT	Relief Scale, 61, 127–128
(cognitive-behavioral therapy) main entry)	REM behavior disorders, 69

S	Tinnitus. See also Chronic tinnitus
Sedative abuse, 47	amplification benefits, 46–47
Self-help workbook. <i>See</i> Patient self-help workbook	associated auditory pathologies, 6, 7
main entry	criterion, 2
Sensorineural tinnitus	delayed-onset, 6
and noise exposure, 7	hallucinations (auditory/musical), 4–5
origin of, 3	and hearing loss degree, 7
as phantom auditory perception, 3	neurological origin, 2
Sleep apnea, 47, 48, 69	neurophysiologic, 3 (See also Sensorineural
Sleep disorders, 25–26	tinnitus <i>main entry</i> )
management of, 48	nonpulsatile, 2 (See also under Tinnitus main entry)
referral for, 47–48	objective, 3
screening, 69–70	onset, 5–6, 8
Sleepiness Scale, Epworth, 69, 141	pathophysiology, 7–8
Somatosound	permanent <i>versus</i> temporary, 5
Audiologic Evaluation, 43–44	and prescription medication, 48 (See also
overview, 2–3	Medications main entry)
and triage, 37	pulsatile, 2 (See also under Tinnitus main entry)
Sound hypersensitivity. See Hyperacusis	recent-onset, 5–6
Sound Plan Worksheet, 57, 59, 60, 62, 64, 72, 76, 77,	risk factors, 6–7
79, 125–126	sensorineural overview, 3 (See also Sensorineural
Sound Tolerance Interview form, 117–119	tinnitus <i>main entry</i> )
Sound Tolerance Interview (STI), 52, 53, 117–119. See	somatic, 2–3
also STEM (sound tolerance evaluation and	somatically modulated, 44
management)	somatic <i>versus</i> neurophysiologic origin, 2
Sound Tolerance Worksheet, 52, 121–122	somatosound, 2–3 (See also Nonpulsatile tinnitus;
STEM (sound tolerance evaluation and	Pulsatile tinnitus; Somatosounds; Tinnitus
management), 40. See also Hyperacusis;	main entry)
Phonophobia	overview, 2–3 (See also Somatosound main entry)
described, 51–52	symptoms, 2
ear-level instrument trial use, 53–54	types, 2
hyperacusis/allied conditions' definitions, 54	sound types, patient reports, 8–9
overview, 28, 51, 54–55	subjective, 4
Sound Tolerance Interview (STI), 52, 53, 117–119	subjective <i>versus</i> objective, 3–4
STI (Sound Tolerance Interview). See also	temporary <i>versus</i> permanent, 5
Hyperacusis; Phonophobia; Sound Tolerance	Tinnitus and Hearing Survey, 101
Interview (STI)	Tinnitus Contrast Activity, 62, 131–132
Stria vascularis ion transport problems, 36	Tinnitus Handicap Inventory, 105–106
Substance abuse, 47	Tinnitus Handicap Inventory: Screening Version,
,	107
	Tinnitus Interview: Interdisciplinary Evaluation,
Т	67, 70, 74, 78
TBI (traumatic brain injury), 6, 17–18	tinnitus neural signal defined, 2 Tinnitus Problem Checklist, 44–45, 60–62, 64, 66, 111
Telephone appointments/follow-up, 17, 18, 63, 66,	triage guidelines, 35–36, 37, 97 (See also Tinnitus
78,79 Therapoutic cound 10 12 14 17 18 25 28 20 45	Triage Guidelines <i>under main entry</i> Forms) video Web site, 49
Therapeutic sound, 10, 12, 14, 17, 18, 25, 28, 30, 45,	
51, 52, 58–59, 66, 70, 72, 73, 77, 79, 81, 82 THI (Tinnitus Handican Inventory), See Tinnitus	Tinnitus and Hearing Survey (THS), 13, 25, 28, 39–41, 44, 51, 59–60, 67, 70, 74, 77–78, 101. See
THI (Tinnitus Handicap Inventory). See Tinnitus Handicap Inventory (THI)	also Audiologic Evaluation; Interdisciplinary
THS (Tinnitus and Hearing Survey). See Tinnitus	Evaluation
and Hearing Survey (THS)	versus THI (Tinnitus Handicap Inventory), 4
and realing barrey (1110)	11. (Indicas Tanaicap inventory), 1

Tinnitus Contrast Activity, 62, 131–132 Tinnitus Handicap Inventory (THI), 41-42, 70, 77-78, 79, 105-106, 107. See also Audiologic Evaluation; Individualized Support; Interdisciplinary Evaluation Tinnitus Interview: Interdisciplinary Evaluation, 133-136 Tinnitus masking (TM). See TM (tinnitus masking) Tinnitus Problem Checklist. See also Audiologic Evaluation TM (tinnitus masking) Individualized Support extended support, 82 overview, 82 in PTM, 12 research, 12, 14 TMJ (temporomandibular joint), 2, 43 Transient ear noise defined, 1–2 Traumatic brain injury (TBI), 16–17 Triage to audiology, 37 guidelines, 35–36, 37 (See also Tinnitus Triage Guidelines under main entry Forms)

to mental health, 36–37
to otolaryngology, 36, 37
overview, 27, 35, 37–38
to urgent care, 36
TRT (tinnitus retraining therapy)
Individualized Support extended support, 82–83
overview, 82–83
in PTM, 12, 61
research, 12, 14

## V

Vascular disruption, 36 Veteran research, 14–18. *See also* Primary Care PTSD Screening Tool (PC-PTSD); PTSD (posttraumatic stress disorder)



What to Do When Everyday Sounds Are Too Loud (without hearing aids), 40, 41, 52, 103–104 Workbook. *See* Patient self-help workbook *main entry*