

Tinnitus Workshop Follow-up

1. Have you been **using sound** to manage your reactions to tinnitus?

YES	NO
If yes, how often?	If no, why not?
A. Very often B. Often C. Sometimes D. Rarely	A. I don't need to do this B. It's not worth the trouble C. I don't know what to do D. I don't think it helps E. I don't like to do this F. Other: _____

2. Have you been **practicing relaxation techniques** (deep breathing and/or imagery) to manage your reactions to tinnitus?

YES	NO
If yes, how often?	If no, why not?
A. Very often B. Often C. Sometimes D. Rarely	A. I don't need to do this B. It's not worth the trouble C. I don't know what to do D. I don't think it helps E. I don't like to do this F. Other: _____

3. Have you been **planning more pleasant activities** to help manage your reactions to tinnitus?

YES	NO
If yes, how often?	If no, why not?
A. Very often B. Often C. Sometimes D. Rarely	A. I don't need to do this B. It's not worth the trouble C. I don't know what to do D. I don't think it helps E. I don't like to do this F. Other: _____

4. Have you been working on **changing your thoughts about tinnitus** to help you feel better?

YES	NO
If yes, how often?	If no, why not?
A. Very often B. Often C. Sometimes D. Rarely	A. I don't need to do this B. It's not worth the trouble C. I don't know what to do D. I don't think it helps E. I don't like to do this F. Other: _____

5. Compared to how I felt before the tinnitus workshops, **I now feel:**
- A. **A lot more in control** of my reactions to tinnitus
 - B. **Somewhat more in control** of my reactions to tinnitus
 - C. **A little more in control** of my reactions to tinnitus
 - D. **The same (no change in control)** of my reactions to tinnitus)

6. Compared to before the tinnitus workshops, my ability to **cope** with tinnitus is now:

A lot worse	Somewhat worse	A little worse	The same	A little better	Somewhat better	A lot better
1	2	3	4	5	6	7

7. Compared to before the tinnitus workshops, my **quality of life** is now:

A lot worse	Somewhat worse	A little worse	The same	A little better	Somewhat better	A lot better
1	2	3	4	5	6	7

8. Compared to before the tinnitus workshops, my tinnitus now **bothers me:**

A lot more	Somewhat more	A little more	The same (just as much as before)	A little less	Somewhat less	A lot less
1	2	3	4	5	6	7

9. Would you **recommend the tinnitus workshops** to someone else who has bothersome tinnitus?

YES NO

If "no," please explain: _____

10. Please **describe your overall experience** learning how to manage your reactions to tinnitus.
