



WELCOME!

Thank you for your interest in The Center for Tinnitus Management. The Center provides diagnostic assessments, education, and management strategies for people who are bothered by their tinnitus. Our goal is to provide you with the information and tools you need to guide you to a point where your tinnitus is no longer an intrusion.

The Center is located at 186 East 76th Street, Second Floor in Manhattan. Our office is one block east of Lenox Hill Hospital and is easily accessible by public transportation (subway at 77th Street & Lexington Avenue). There is also a public parking garage directly across the street from our office.

TO PREPARE FOR YOUR APPOINTMENT.

Following a full medical evaluation by an ear, nose and throat physician or neurologist, please complete the enclosed form prior to your visit at the Center.

WHAT SHOULD I EXPECT?

Your initial consultation lasts approximately 1.5-2 hours. It is recommended that you bring a relative or friend to the appointment. A complete audiological evaluation and a battery of tests will be performed which will provide us with information about your hearing, tinnitus and/or hyperacusis. Some of these tests are not routinely performed in other clinics. If you recently had any audiological or medical tests, please bring those results with you. Due to the specialized nature of some of the tests performed in our Center, we will need to perform our own assessment even if you have had testing completed recently.

Following your assessment, the results will be discussed with you in detail and your questions will be addressed. Based on what is found during the consultation, an individualized plan is established to guide you on the path to managing your tinnitus. This might entail techniques such as TRT (Tinnitus Retraining Therapy), Neuromonics Tinnitus Treatment, hearing instruments, stress/ anxiety management, hearing protection, enhanced sound environment or a combination of several of these options.

WILL MY INSURANCE COVER THE EVALUATION?

It is possible that some basic diagnostic procedures may be covered by your insurance plan. The coverage will depend on the type of plan you have. Please contact our patient care coordinator to determine if the Center accepts assignment from your insurance. In addition, there is an initial consultation fee of \$300.00. This fee is for educational components of the assessment and counseling that are not covered by insurance plans. Please keep in mind, payment is expected at the time services are provided.

Please note that we require a physician's prescription stating that you have had a complete examination to rule out any serious medical cause for your tinnitus. If you have not had this evaluation, we will be happy to arrange an appointment for you with one of our affiliated physicians.

Thank you for considering The Center for Tinnitus Management. We look forward to seeing you for your scheduled appointment. Should you have further questions, please feel free to contact our office at 212 774 1971.

Sincerely,

Craig A. Kasper, Au.D., FAAA
Chief Audiology Officer, Audio Help Hearing Centers
Director, The Center for Tinnitus Management

Sound Therapy Option Profile (STOP)

Name: _____

Date: _____

Our goal is to help you find a method or combination of methods that will provide you with relief from your tinnitus. Management options provided in our Center may include sound therapy using assistive devices, hearing instruments, ear-level sound generators and/ or an acoustic desensitization protocol using a form of music therapy. Other options may include behavioral modification therapy provided by an affiliated psychologist. In order to reach our goal of providing you with tinnitus relief, it is important that we understand your perceived tinnitus and hearing problems, your personal preferences, and your expectations. By having a better understanding of your needs, we can use our expertise to recommend the form of sound therapy most appropriate for *you*. By working together *we* will find the best tinnitus management option for you.

Please complete the following questions. Be as honest as possible. Be as precise as possible. Thank you.

How much does your tinnitus affect your overall quality of life? Mark an X on the line. Not Very Much ----- Very Much		
How important is it for you to hear better? Mark an X on the line. Not Very Important ----- Very Important		
How motivated are you to use some form of sound therapy to help provide tinnitus relief? Mark an X on the line. Not Very Motivated ----- Very Motivated		
Are you willing to use sound therapy (please circle Y or N):		
Only at those times when your tinnitus is bothering you?	Y	N
At least 2-3 hours per day for at least six months?	Y	N
At least 6-8 hours per day possibly up to 12-18 months?	Y	N
Do you expect the recommended sound therapy to be effective in providing you relief from tinnitus? I expect the sound therapy to (mark an X on the line): Not be very helpful at all ----- Provide a great deal of relief		

What is the most important consideration regarding sound therapy treatment? Rank the following factors with “1” as the most important and “4” as the least important. Place an “X” on the line if the item has no importance at all.

- _____ Improved hearing
- _____ Tinnitus relief
- _____ Improved hearing along with tinnitus relief
- _____ Cost of treatment

How acceptable would you find each one of the following sounds? Rank the following with “1” as the most acceptable and “3” as the least acceptable. Place an “X” on the line if that sound would not be acceptable at all.

- _____ Nature sounds (waterfall, surf, wind, etc.)
- _____ Gentle white noise
- _____ Music

Would you be willing to pursue any of the following forms of treatment?

- | | | |
|--|---|---|
| Wearable ear-level device for one or both ears | Y | N |
| Wearable device that looks like an iPod or MP3 player | Y | N |
| Assistive sound generating device (bedside masker, CDs) | Y | N |
| Psychological forms of treatment (additional counseling) | Y | N |

How confident do you feel that you will be successful in using some form of sound therapy in the management of your tinnitus? (mark an X on the line)

Not very confident ----- Very confident

In the past, have you tried any of the following forms of tinnitus treatment (please circle):

- | | |
|--------------------------------------|-----------------------------|
| Tinnitus masking | Psychological |
| Tinnitus Retraining Therapy (TRT) | Other form(s) of treatment: |
| Assistive sound generating device | |
| Medical (medications, surgery, etc.) | |

There is a wide range of available sound therapy options that may be used to help provide relief from your tinnitus. Devices are typically not covered by insurance. The selection of a particular form of sound therapy depends on a variety of factors including the type of device preferred, level and sophistication of device technology, length of time required for treatment, and personal finances. This information is helpful for us to select the most appropriate hearing device technology based on your budget. Please mark an “X” on the line that represents the MAXIMUM amount you are willing to spend for your tinnitus treatment.

\$ ----- \$\$ ----- \$\$\$ ----- \$\$\$\$ ----- \$\$\$\$\$

Cost is a major factor

Cost is not that important

Thank you for answering the questions. Your responses will assist us in providing you with the best options to help you manage your tinnitus.

