

Supplemental Material S2.

Self-Efficacy for Managing Reactions to Tinnitus (SMRT)

Please circle your answer.

1. How confident are you that you can keep the fatigue caused by your tinnitus from interfering with the things you want to do?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

2. How confident are you that you can keep the discomfort of your tinnitus from interfering with the things you want to do?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

3. How confident are you that you can keep the emotional distress caused by your tinnitus from interfering with the things you want to do?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

4. How confident are you that you can keep any other symptoms or health problems you have from interfering with the things you want to do?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

5. How confident are you that you can do the different tasks and activities needed to manage your tinnitus so as to reduce your need to see a doctor?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

6. How confident are you that you can do things other than taking medication to reduce how much your tinnitus affects your everyday life?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

7. How confident are you that you can use sound to take your mind off your tinnitus?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

8. How confident are you that you can find a way to relax when your tinnitus is bothering you?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

9. How confident are you that you can reduce stress caused by tinnitus?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

10. How confident are you that you can do things to take your mind off your tinnitus?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

11. How confident are you that you can do things to keep your tinnitus from affecting your daily activities?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

12. How confident are you that you can concentrate when your tinnitus is bothering you?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

13. How confident are you that you can do things to keep your tinnitus from affecting your sleep?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

14. How confident are you that you can do things to help yourself fall asleep or stay asleep, even when you hear your tinnitus?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

When your tinnitus is bothering you...

15. ...how confident are you that you can use sound to make yourself feel better?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

16. ...how confident are you that you can manage your reactions to tinnitus?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident

17. ...how confident are you that you can change the way you think about your tinnitus to make yourself feel better?

1	2	3	4	5	6	7	8	9	10
Not at all confident									Totally confident