Tinnitus may be associated with one or more of the following conditions. It is recommended that all providers check all conditions in this chart, even if a positive answer leads to a specific referral. Redirection to subsequent decisions is provided for those conditions that have common comorbidities. This process chart may require updates as new information becomes available.

**INTAKE PROCESS FOR TINNITUS**

**PATIENT PRESENTS WITH TINNITUS**

- **Is tinnitus pulsatile?**
  - **YES**
    - Medical referral for evaluation of blood flow abnormalities in the head and neck.
  - **NO**
    - **Recent dental work or jaw pain?**
      - **YES**
        - Refer to dentist/orthodontist for further evaluation and treatment of possible TMJ disorder.
      - **NO**
        - **History of head injury/TBI diagnosis?**
          - **YES**
            - Refer to neuro-otology for evaluation of central lesion, labyrinthine disease, or other otologic condition.
          - **NO or YES**
            - **Signs of PTSD, depression, anxiety, or other MHD?**
              - **YES**
                - Refer to specialist for head injury. Refer for psychological/psychiatric management as indicated.
              - **NO**
                - **Is tinnitus unilateral?**
                  - **YES**
                    - Refer to audiologist specializing in tinnitus.
                  - **NO**
                    - **Recent flying or diving?**
                      - **YES**
                        - Refer for mental health counseling and treatment, as necessary, with provider offering Cognitive Behavioral Therapy (CBT).
                      - **NO**
                        - **No evident etiology or comorbidity?**
                          - **YES**
                            - Consider medication for sleep, a sleep study, or referral to psychology for CBT as indicated.
                          - **NO or YES**
                            - **Sleep disorder noted?**
                              - **YES**
                                - Refer to audiologist for assessment and treatment, if indicated.
                              - **NO or YES**
                                - **Sound tolerance problems?**
                                  - **YES**
                                    - Refer to audiologist for assessment and treatment, if indicated.
                                  - **NO**
                                    - **Is sleep disorder due to non-tinnitus factors, severe in nature, or sound therapy ineffective?**
                                      - **YES**
                                        - Refer to audiologist for sound therapy consultation.
                                      - **NO**
                                        - Refer to otology, audiology for assessment of middle ear, sinus, ear barotrauma.

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