**Supplementary file 4.** Comments in favour and against, explaining the reasons for setting aside those outcome domains which failed to reach the 70% consensus in the face-to-face meeting for psychology-based interventions. Votes represent the % of the 19 participants who agreed that these outcome domains were not critical to be measured in every clinical trial for psychology-based tinnitus interventions (threshold ≥30%).

Psychology-based	Vote	Comments in favour	Comments against
exclusions			
Ability to ignore	95	No strong views expressed.	<ul> <li>Some patients are able to cope with their tinnitus without trying to ignore it.</li> <li>Some psychological treatments specifically aim not to ignore the tinnitus.</li> <li>Could be covered by 'tinnitus intrusiveness'.</li> </ul>
Annoyance	74	No strong views expressed.	No strong views expressed.
Anxiety	95	<ul> <li>Identified as a major focus for psychology-based treatments.</li> <li>When a person is anxious, it has a big impact on life.</li> </ul>	<ul> <li>If 'anxiety' means a clinically meaningful anxiety disorder, then this definition applies to a very limited number of people with tinnitus.</li> <li>The more everyday experience of anxiety could be captured by the outcome domain 'mood'.</li> </ul>
Catastrophising	74	No strong views expressed.	No strong views expressed.
Concentration	89	No strong views expressed.	<ul> <li>The group noted that there might be other reasons for lack of concentration other than tinnitus.</li> <li>One subgroup argued this might not be very sensitive to the effects of a psychological intervention.</li> <li>Some considered this to be similar to 'tinnitus intrusiveness'.</li> </ul>
Coping	37	No strong views expressed.	Improving on a coping scale (as in using different coping strategies) does not always mean that the person is improving.
Depressive symptoms	95	When a patient is depressed, it has a big impact on life.	<ul> <li>If 'depressive symptoms' means a clinically meaningful depression disorder, then this definition applies to a very limited number of people with tinnitus.</li> <li>The more everyday experience of depression could be captured by the outcome domain 'mood'.</li> </ul>

Difficulties getting to	69	The group identified that this is often a major focus	• The group noted that not everyone has 'difficulties getting to sleep',
sleep		for psychology-based intervention.	and so it is not a prominent issue for all people with tinnitus.
		One participant mentioned that sleep is fundamental	Could be covered by 'tinnitus intrusiveness'.
		to general health.	
Fear	74	No strong views expressed.	No strong views expressed.
Helplessness (lack of control)	74	No strong views expressed.	No strong views expressed.
Impact on individual activities	95	No strong views expressed.	Could be covered by 'tinnitus intrusiveness'.
Impact on relationships	74	No strong views expressed.	Could be covered by 'tinnitus intrusiveness'.
Impact on social life	95	<ul> <li>The group acknowledged that tinnitus has a major impact on social activities (e.g. can cause isolation).</li> <li>One participant felt this was important because one's social life is essential for personal well-being.</li> </ul>	Could be covered by 'tinnitus intrusiveness'.
Impact on work	95	No strong views expressed.	Could be covered by 'tinnitus intrusiveness'.
Irritable	74	No strong views expressed.	No strong views expressed.
Quality of sleep	74	No strong views expressed.	The group noted that not everyone has poor 'quality of sleep', and so it is not a prominent issue for all people with tinnitus.
Suicidal thoughts	74	No strong views expressed.	No strong views expressed.
Tinnitus-related thoughts	74	No strong views expressed.	No strong views expressed.
Worries/concerns	74	No strong views expressed.	No strong views expressed.