

**DEPARTMENT OF SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY
ANDREWS UNIVERSITY
SPEECH AND HEARING CLINIC**

DIAGNOSTIC REPORT

Patient's Name:
Address:
Date of Birth:
Telephone (home):
E-Mail:
Referral Source:
Diagnosis:
Date of Evaluation:

_____, age ____ years was seen for a voice evaluation on _____.
The reason for referral was “_____”
_____.” He/she referred by _____.
_____ described his/her voice problem in the following way:
“_____”

Background Information

_____ reported that he/she had been troubled by the voice problem for approximately _____. The onset was (sudden/gradual) and marked by deterioration of _____. _____ judged the disruption in occupational and social performance to be (mild/moderate/severe). Times when the voice was (better/worse) included _____. Significant others' reactions to the voice problem were described as _____. _____ reported that he/she has attempted to address the problem by _____ and that (some/no) remission of symptoms had been noted. _____ reported he/she has engaged in the following activities requiring sustained voice use _____. A history of (voice training/treatment) for approximately _____ was reported. Medically relevant information provided during the interview revealed a history of _____. The (client/patient) is currently taking the following medications _____.

Examination

A. Perceptual evaluation of the (patient's/client's) vocal behavior during the interview revealed that _____.

(Dysphonic/aphonic) episodes seemed related to _____. Pitch level and variability was (appropriate/inappropriate) with respect to age and gender. Respiration for speech was marked by (clavicular/lower chest) movement, (adequate/inadequate) use of replenishing breaths, and (appropriate/inappropriate) coordination of voice onset and initiation of exhalation.

Continuity of voice (was/was not) noted throughout the breath groups and (voice breaks/tremor/fading at ends of utterances) were (present/absent). Quality characteristics included (hoarseness/harshness/diplophonia) and visible signs of musculo-skeletal tension (were/were not) seen. Facilitating techniques that were used included _____ and (were/were not) noted to modify symptoms. The overall vocal pattern could be described as - _____. Symptoms were judged to be of _____ severity and (consistent/inconsistent) with respect to _____.

B. The following tests (MPT; s/z ratio; high-quiet singing; laryngeal diadochokineses; reading /speaking; rate analysis; hearing) were administered and results revealed _____. (Acoustic/aerodynamic findings were (consistent/inconsistent) with the perceptual assessment of _____).

C. Visualization of laryngeal structure and function using _____ Revealed that the movement and closure patterns of the folds were _____ and that (color/secretion level/evenness of margins/lesions) indicated _____.

D. Psychosocial factors noted during the examination included _____. The (patient/client) appeared to demonstrate (anxiety/depression/high level of stress) concerning his or her (situation/voice problem) and was (responsive/unresponsive) to the (stimulability activities/suggestions/question/tasks).

E. An oral examination revealed normal structure and function for speech and a _____ occlusion was noted. Tonsils and adenoids were _____.

F. Resonance balance was (appropriate/inappropriate)during both nasal and oral test sentences, humming, and sustained vowels. (Presence/absence) of signs of (nasal obstruction/velopharyngeal closure problems) was observed.

Clinical Impressions may be summarized in the following way: _____

Recommendations (select appropriate numbers):

1. _____ should be referred for (additional testing/consults) to _____.
2. Voice therapy to address the areas of _____ should be implemented (immediately/following confirmation clinical impressions by further testing). Therapy regimen should consist of _____.

3. Voice therapy is not recommended at this time but _____
should return if the condition (persists/deteriorates).

4. _____ was counseled concerning

_____.

Signature: _____

Title: _____

Date: _____