

Lee Silverman Voice Institute Case Voice Form

Name:		Date:	
Occupation:		Full-time or Part-time:	
Referring MD:			
ENT:		Neurologist:	
Primary Physician:	Gastroenterologist:	Pulmonologist:	
Medical History:			
Surgery History:			
Hospitalizations:			
Describe your speech and voice problem:			
When did it first occur?			
What is your goal of speech therapy? _____			
Have you had speech therapy before? _____ When? _____ Where? _____			
LSVT Parkinson's Program:			
1. Date of initial diagnosis? _____			
2. Do you have a deep brain stimulator? _____ If so, when was it placed? _____			
3. Has your speech gotten worse since DBS? _____			
4. Have you noticed a decline in your memory? _____			
Perceptual Rating Form			
Please check the box which best represents the client's typical speech:			
Always loud enough	Never loud enough		
Never a "shaky" voice	Always a "shaky" voice		
Never a hoarse "scratchy" voice	Always a hoarse "scratchy" voice		
Never monotone	Always monotone		
Never Slurs	Always Slurs		
Never a "strained" voice	Always a "strained" voice		
Never mumbles	Always mumbles		
Always speaks so others can understand	Never speaks so others can understand		
Always participates in a conversation	Never participates in a conversation		
Always starts a conversation	Never starts a conversation		

Never=0 points, Almost Never=1 point, Sometimes=2 points, Always=3 points, Always=4 points

Voice Handicap Index (Answer with a "0,1,2,3, or 4")	Never 0	Almost Never 1	Sometimes 2	Almost Always 3	Always 4
1. My voice makes it difficult for people to hear me.					
2. I run out of air when I talk					
3. People have difficulty understanding me in a noisy room					
4. The sound of my voice varies throughout the day					
5. My family has difficulty hearing me when I call them throughout the house					
6. I use the phone less often than I would like					
7. I'm tense when talking with others because of my voice					
8. I tend to avoid groups of people because of my voice					
9. People seem irritated with my voice					
Voice Handicap Index (Answer with a "0,1,2,3, or 4")	Never 0	Almost Never 1	Sometimes 2	Almost Always 3	Always 4
10. People ask, "what's wrong with your voice?"					
11. I speak with friends, neighbors, or relatives less often because of my voice					
12. People ask me to repeat myself when speaking face-to-face					
13. My voice sounds creaky and dry					
14. I feel as though I have to strain to produce voice					
15. I find other people don't understand my voice problem					
16. My voice difficulties restrict my personal and social life					
17. The clarity of my voice is unpredictable					
18. I try to change my voice to sound different					
19. I feel left out of conversations because of my voice					
20. I use a great deal of effort to speak					
21. My voice is worse in the evening					
22. My voice problem causes me to lose income					
23. My voice problem upsets me					
24. I am less out-going because of my voice problem					
25. My voice makes me feel handicapped					
26. My voice "gives out" on me on the middle of speaking					
27. I feel annoyed when people ask me to repeat					
28. I feel embarrassed when people ask me to repeat					
29. My voice makes me feel incompetent					
30. I'm ashamed of my voice problem					