

# Voice History for Singers

Name:		Date:	
Occupation:		Full-time or Part-time:	
Referring MD:			
ENT:		Neurologist:	
Primary Physician:	Gastroenterologist:	Pulmonologist:	
Medical History:			
Surgery History:			
Hospitalizations:			
Describe your voice problem: History:			
When did it first occur?			
What is your goal of speech therapy? _____			
Have you had speech therapy before? _____ When? _____ Where? _____			

**Voice Category:** \_\_\_soprano \_\_\_mezzo-soprano \_\_\_alto \_\_\_tenor \_\_\_baritone \_\_\_bass

- How long have you had your present voice problem? \_\_\_\_\_
- Who noticed it first? (self, family, voice teacher, critics, everyone, other \_\_\_\_\_)
- Do you know what caused it? \_\_\_\_\_ If Yes, what? \_\_\_\_\_
- Did it come on slowly or suddenly? \_\_\_\_\_
- Is it getting worse, better, or the same? \_\_\_\_\_
- Check the symptoms you have: \_\_\_ hoarseness \_\_\_ vocal fatigue \_\_\_ volume disturbance (trouble singing softly or loudly) \_\_\_ loss of range \_\_\_ breathiness \_\_\_ Change in voice category (example: voice lowered from soprano to mezzo) \_\_\_ pain in throat while singing \_\_\_ tickling or choking sensation while singing \_\_\_ prolonged warm-up time (over 1/2 hr to warm up voice)
- Do you have an important performance soon?  Yes  No Dates: \_\_\_\_\_
- What is the current status of your singing career? Amateur or Professional
- What are your long-term career goals in singing? \_\_\_\_\_
- Have you had voice training? \_\_\_\_\_ At what age did you begin? \_\_\_\_\_
- Have there been periods of months or years without lessons in that time? \_\_\_\_\_

12. How long have you studied with your current teacher? \_\_\_\_\_  
Teacher's Name and Ph#: \_\_\_\_\_
13. Have you ever had training for your speaking voice? \_\_\_\_\_
14. Have you ever had acting lessons? \_\_\_\_\_
15. Do you have a job in addition to singing?  Yes  No If so, what? \_\_\_\_\_
16. What types of music do you sing? \_\_Classical \_\_ Nightclub \_\_Show \_\_ Rock \_\_ Other: \_\_\_\_\_
17. Do you regularly sing in a sitting position (such as from behind a piano or drums?) \_\_\_\_\_
18. Do you sing outdoors or in large halls or with an orchestra? \_\_\_\_\_
19. How often do you practice scales? (daily, once weekly, rarely, never) (Circle one)
20. How long do you practice your scales? (15 mins, 30, 40 ) (Circle one)
21. How many hours a day do you practice? \_\_\_\_\_
22. Do you warm up your voice before you sing? \_\_\_\_\_ Cool down? \_\_\_\_\_
23. How many hours a shift and how many times a week do you sing in rehearsal? \_\_\_\_\_  
In performance? \_\_\_\_\_
24. Please check all that apply to you: \_\_\_\_voice worse in the morning \_\_\_\_voice worse later in the day  
\_\_\_\_sing performances or rehearsals in the morning \_\_\_\_speak extensively \_\_cheerleader  
\_\_\_\_speak extensively backstage/postperformance parties \_\_\_\_choral conductor \_\_frequently  
clear your throat \_\_frequent sore throat \_\_jaw problems \_\_ bitter taste in morning  
\_\_\_\_frequent heartburn or hiatal hernia \_\_\_\_frequent yelling or loud talking \_\_frequent  
whispering \_\_\_\_insomnia \_\_work around extreme dryness \_\_frequent exercise \_\_ frequently  
thirsty \_\_ hoarseness in the morning \_\_\_\_chest cough \_\_eat late at night \_\_ever used  
antacids \_\_\_\_under particular stress at present \_\_frequent bad breath \_\_live or work around  
smoke or fumes
25. Any voice problems in the past that required a visit to a doctor? Yes  No  
If yes, explain: \_\_\_\_\_
26. Recent cold? \_\_\_\_\_ Current cold? \_\_\_\_\_
27. Do you exercise? \_\_\_\_\_ How often? \_\_\_\_\_
28. How many packs of cigarettes do you smoke a day?\_\_\_\_ How many yrs. have you smoked?\_\_\_\_
29. Do you live or work in a smoky environment? \_\_\_\_\_ Where? \_\_\_\_\_
30. How much alcohol do you drink? (none, rarely, a few times a week, daily) (Check one)
31. Did you formerly drink more heavily? \_\_\_\_\_
32. How many cups of coffee, tea, cola, or other caffeine drinks do you have a day? \_\_\_\_\_
33. Circle the recreational drugs you use (marijuana, cocaine, amphetamines, barbiturates,  
heroin, other, none).
34. Have you ever consulted a psychologist or psychiatrist? \_\_\_\_\_ Currently under treatment? \_\_\_\_\_
35. Have you injured your neck or head? \_\_\_\_\_
36. Are you involved in legal action involving problems with your voice? \_\_\_\_\_

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

<b>Voice Handicap Index (Enter a "0,1,2,3, or 4")</b>	<b>Never 0</b>	<b>Almost Never 1</b>	<b>Sometimes 2</b>	<b>Almost Always 3</b>	<b>Always 4</b>
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					
<b>Voice Handicap Index (Enter a "0,1,2,3, or 4")</b>	<b>Never 0</b>	<b>Almost Never 1</b>	<b>Sometimes 2</b>	<b>Almost Always 3</b>	<b>Always 4</b>
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					

# Singers Questionnaire

Name: \_\_\_\_\_ Date: \_\_\_\_\_

1. I would rate my degree of talkativeness as the following: (C\YWUnumber response)

1	2	3	4	5	6	7
Quiet			Average			Extremely
Listener			Talker			Talkative

2. **Reflux Severity Index (RSI):** These are statements that many people have used to describe their voice and the effects of their voices on their lives. C\YWcb`micbYresponse that indicates how frequently you have the same experience:

Within the last MONTH, how did the following problems affect you?

	0 = No problem		5 = Severe Problem				
Hoarseness or a problem with your voice	0	1	2	3	4	5	
Clearing your throat	0	1	2	3	4	5	
Excess throat mucous	0	1	2	3	4	5	
Difficulty swallowing food, liquids, or pills	0	1	2	3	4	5	
Coughing after eating or after lying down	0	1	2	3	4	5	
Breathing difficulties or choking episodes	0	1	2	3	4	5	
Troublesome or annoying cough	0	1	2	3	4	5	
Sensations of something sticking in your throat or a lump in your throat	0	1	2	3	4	5	
Heartburn, chest pain, indigestion, or stomach acid coming up	0	1	2	3	4	5	

**Total Score: \_\_\_\_\_ (Score 12 or higher = LPR)**

3. **Singers VHI-10** These are statements that may people have used to describe their singing and the effects of their singing on their lives. Please c\YWcZZthe response that indicates how frequently you have the same experience in the last 4 weeks.

**(0=never, 1=almost never, 2=sometimes, 3=almost always, 4=always)**

1. It takes a lot of effort to sing	0	1	2	3	4	5
2. I am unsure of what will come out when I sing	0	1	2	3	4	5
3. My voice "gives out" on me while I am singing	0	1	2	3	4	5
4. My singing voice upsets me	0	1	2	3	4	5
5. I have no confidence in my singing voice	0	1	2	3	4	5
6. I have trouble making my voice do what I want it to	0	1	2	3	4	5
7. I have to "push it" to produce my voice when singing	0	1	2	3	4	5
8. My singing voice tires easily	0	1	2	3	4	5
9. I feel something is missing in my life because of my inability to sing	0	1	2	3	4	5
10. I am unable to use my "high voice"	0	1	2	3	4	5

**Vegas Voice Institute**