Date: Name: Birthdate:

DR. JAMIE KOUFMAN'S CLINICAL INDICES:: www.VoiceInstituteofNewYork.com

The Glottal Closure Index (GCI)

How do the following affect you?		0 = No Problem			5 = Severe Problem			
Speaking takes extra effort	0	1	2	3	4	5		
Throat discomfort or pain after using your voice	0	1	2	3	4	5		
Vocal fatigue, voice weakens as you talk	.0	1	2	3	4	5	GCI	
Voice cracks or sounds different	0	1	2	3	4	5		

If the GCI is 10 or greater, the patient has a glottal closure problem such as atrophy, scarring, paresis, paralysis, or striking-zone pathology, e.g. polyp or other neoplasm.

The Reflux Symptom Index (RSI)

How do the following 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	1
Excess throat mucous or postnasal drip	0	1	2	3	4	5	1
Difficulty swallowing food, liquids, pills	0	1	2	3	4	5	1
Coughing after you ate or lying down	0	1	2	3	4	5	
Breathing difficulty or choking episodes	0	1	2	3	4	5	
Troublesome or annoying cough	0	1	2	3	4	5	
Sensations of a lump in your throat	0	1	2	3	4	5	RS
Heartburn, chest pain, or indigestion	0	1	2	3	4	5	1

If the RSI score is 15 or greater, the patient has a 90% chance of having respiratory reflux by ISFET pH monitoring.

The Reflux Finding Score (RFS) #2 18

Pseudosulcus	2 Present					
Ventricular obliteration	2 Partial		4 Complete			
Erythema/Hyperemia	2 Aryter	noids (only)	4 Diffuse			
Vocal fold edema	1 Mild	2 Moderate	3 Severe	4 Polypoid		
Diffuse laryngeal edema	1 Mild	2 Moderate	3 Severe	4 Obstructing		
Posterior commissure hypertrophy	1 Mild	2 Moderate	3 Severe	4 Obstructing		
Tiger-stripe post-cricoid edema	2 Present		4 Severe			
Thick endolaryngeal mucus	2 Present					
Granuloma/Granulation	2 Present					
	Reflux Finding Score					

Date: Voice Analysis guidelines
Name: Østergade 18, 1

Mette Pedersen Anders Jønsson

Birthdate:

MPT Hz DB (110/220 Hz)

(220/440 Hz)

Phonetogram

Upper limit Hz / DB
Lower limit Hz / DB

Register transistion max Hz / DB

Register transistion min Hz / DB

Maximum intensity Lower register: Hz / DB

Maximum intensity Upper register: Hz / DB

Electroglottography (EGG) (with/without simultaneous HSDI)

Regular curve

Irregular curve

Closing factor

Overtone analysis (Sygyt®)

Vibrato, comments:

Formants (1, 2, 3, 4) Comments:

Register transitions: Hz

Stability comments:

Speaking frequency measurement

Counting "1-10": Hz / DB

Operavox app:

Date: Name: Birthdate:

Cough form (in case of cough problems)

Voice Institute of New York Chronic	Co	ugh Fo	rm			
Is your main problem COUGH?; For h	ow	many yea	ars?			
When your cough began, had you had a respirat	ory	infection,	, cold, t	he flu	, or other	21
illness?				<u> </u>		
Had a chest x-ray within the last two years?	-	_;Norma	!?			
Do you have a pulmonologist (lung doctor)?			55			
Are you on blood pressure medicine?; W	hich	?			e,	
Koufman Chronic Cough Index (KCCI) (Please circle "Yes" or "No" for all ten question	(R =	Reflux,	N= No	eurog	enic)	
Do you awaken from a sound sleep coughing violently, with or without trouble breathing?		YES	NO			
Do you have choking episodes when you cannot get enough air, gasping for air?		YES	NO			
Do you usually cough when you lie down into the bed, or when you just lie down to rest?		YES	NO			
Do you usually cough after meals or eating?		YES	NO			
Do you cough when (or after) you bend over?		YES	NO			
Do you more-or-less cough all day long?		NO	YES			
Does change of temperature make you cough?		NO	YES			
Does laughing or chuckling cause you to cough?		NO	YES			
Do fumes (perfume, automobile fumes, burned toast, etc.) cause you to cough?		NO	YES			
Does speaking, singing, or talking on the phone cause you to cough?		NO	YES	7		
	R	1		N		

Now, add the two columns up to derive the Reflux-to-Neurogenic ratio

Voice Analysis guidelines Østergade 18, 1 Mette Pedersen Anders Jønsson

Name: Birthdate:

Date:

Recording made at Hz and dB.

Movement patterns

Regular / Irregular (Mark appropriate) Comments:

- R. Vocal fold movements:
- L. Vocal fold movements:

Mucosa evaluation comments:

Kymography

Regular / Irregular (Mark appropriate) Comments:

- R. Vocal fold movements:
- L. Vocal fold movements:

Segmentation analysis

Front: Middle: Rear:

Open Quotient: % % %

Single movements:

Right Vocal fold: Reg. / Irreg. Reg. / Irreg. Reg. / Irreg. (Mark appropriate) Comments:

Left Vocal fold: Reg. / Irreg. Reg. / Irreg. Reg. / Irreg. (Mark appropriate) Comments:

Overlapping: ++ / + / - ++ / + / - (Mark appropriate) Comments:

Movement quality:

Closing speed: comment:

Flexibility: Front: Middle: Rear:

Acustical signal: Regular / Irregular (Mark appropriate) Possible further analysis in Operavox app.

Phonovibrogram

Right vocal fold: Regular / Irregular (Mark appropriate)

Left vocal fold: Regular / Irregular (Mark appropriate)

Closure deficit of the rear larynx: + / -

Quantitative Glottal Area Waveform measure in seldom cases (Glottal Analysis Tools®: 183 parameters)