**STUDENT’S VOICE HEALTH HISTORY  - CONFIDENTIAL-**

* Do you have any physical or medical issues you believe impact your voice negatively?

 - broken bones

 - torn ligaments

 - headgear for orthodontia

 - foot/ankle problems

 - balance/inner ear/hearing issues

 - allergies

 - asthma

 - reflux

 - thyroid/other hormonal concerns

* Have you ever been treated for any voice issues or disorders?

* Does your menstrual cycle impact or impair your singing?

 -delayed vocal onset

 -range change

 -vocal huskiness

 -migraine/other extreme pain

 -cramping

 -mental fog

* If you currently taking medications, check this website for any possible effects they may have on your voice: <http://ncvs.org/rx.html> (explains risks of ibuprofen and other NSAID meds)
* Are you regularly exposed to airborne chemicals such as chlorine (swimming pools), gasoline or natural gas fumes?
* Do you smoke or vape tobacco or cannabis?
* Do you drink alcohol?
* Do you ingest caffeine?
* What kind of performance schedule do you have?

* How much do you use your voice in your daily life? (Is your workday different than your off day?)

* Do you have hobbies/activities/sports that involve your vigorous voice use, including speaking, chanting or singing in loud environments?

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* How does your voice feel today?

 -breathing

 -muscle flexibility

 -head/neck/jaw balance

 -tongue/swallowing

 -throat

 -pharyngeal/nasal congestion

 -mental clarity or fog

 -emotional upset or balance