**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