

## D - Voice - Precancerous Lesions

Record ID \_\_\_\_\_

### 1. Gold Standard Diagnosis

Does the patient have a precancerous vocal fold lesion confirmed by laryngoscopy/stroboscopy?

- ☐ Yes  
☐ No  
☐ Not certain

Does the patient have a precancerous vocal fold lesion confirmed by biopsy/pathology?

- ☐ Yes  
☐ No  
☐ Not certain

### 2. Disease Subtype

What is the diagnosis?  
(Select all that apply).

- ☐ Keratosis  
☐ Leukoplakia  
☐ Erythroplakia  
☐ Other

Keratosis

- ☐ With dysplasia  
☐ Without dysplasia

Keratosis with dysplasia

- ☐ Low grade  
☐ Moderate grade  
☐ High grade

Leukoplakia

- ☐ With dysplasia  
☐ Without dysplasia

Leukoplakia with dysplasia

- ☐ Low grade  
☐ Moderate grade  
☐ High grade

Erythroplakia

- ☐ With dysplasia  
☐ Without dysplasia

Erythroplakia with dysplasia

- ☐ Low grade  
☐ Moderate grade  
☐ High grade

Other, please specify \_\_\_\_\_

### 3. Etiology

Does the patient have the following risk factors?  
(Select all that apply).

- ☐ Past or present smoking  
☐ Laryngopharyngeal reflux  
☐ Other irritants

Other irritants \_\_\_\_\_

**4. Disease Severity**

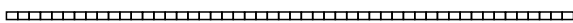
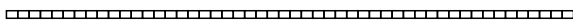
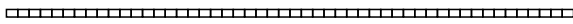
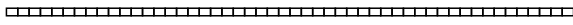
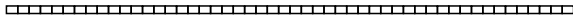
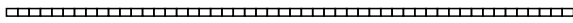
Location of lesion(s)  
(Select all that apply).

- ☐ Right vocal fold  
☐ Left vocal fold  
☐ Both vocal folds  
☐ Ventricular folds (right or left)  
☐ Subglottal areas

Degree of dysphonia

Clinician places slider between 0 and 100; indicates C or I. "Indicate the nature.." and Additional features responses are free text. Comments about resonance: Indicate normal or Other, if other then free text

Legend: C- Consistent I = Intermittent  
MI = Mildly Deviant  
MO = Moderately Deviant  
SE = Severely Deviant

|   |  |    |    |
|---|--|----|----|
| Overall Severity                                      | MI   | MO | SE |
|   |    |    |    |
|   | (Place a mark on the scale above)  |    |    |
| Overall Severity                                      | <input type="radio"/> Consistent <input type="radio"/> Intermittent                  |    |    |
| Roughness   | MI   | MO | SE |
|   |    |    |    |
|   | (Place a mark on the scale above)  |    |    |
| Roughness   | <input type="radio"/> Consistent <input type="radio"/> Intermittent                  |    |    |
| Breathiness   | MI   | MO | SE |
|   |  |    |    |
|   | (Place a mark on the scale above)  |    |    |
| Breathiness   | <input type="radio"/> Consistent <input type="radio"/> Intermittent                  |    |    |
| Strain  | MI   | MO | SE |
|   |  |    |    |
|   | (Place a mark on the scale above)  |    |    |
| Strain  | <input type="radio"/> Consistent <input type="radio"/> Intermittent                  |    |    |
| Pitch   | MI   | MO | SE |
|   |  |    |    |
|   | (Place a mark on the scale above)  |    |    |
| Pitch<br>(Indicate the nature of the abnormality):    | <hr/>  |    |    |
| Pitch   | <input type="radio"/> Consistent <input type="radio"/> Intermittent                  |    |    |
| Loudness  | MI   | MO | SE |
|   |  |    |    |
|   | (Place a mark on the scale above)  |    |    |
| Loudness<br>(Indicate the nature of the abnormality): | <hr/>  |    |    |

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Loudness☐ Consistent   ☐ Intermittent

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Comments about resonance☐ Normal   ☐ Other

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Please specify

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Additional Features

(for example, diplophonia, fry, falsetto, asthenia, aphonia, pitch instability, tremor, wet/gurgly, or other relevant terms):

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**5. Treatment obtained**

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Has the patient undergone any treatment for this condition?

☐ Yes  
☐ No

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Select all that apply:

- ☐ Surveillance only (previous diagnosis)
- ☐ Laser resection
- ☐ Laser ablation
- ☐ Microlaryngeal surgery without laser
- ☐ Radiotherapy for persistent or recurrent lesions
- ☐ Voice/speech therapy
- ☐ Other

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Other, please specify

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