

D - Voice - Precancerous Lesions

Please complete the survey below.

Thank you!

1. Gold Standard Diagnosis

Does the participant have a precancerous vocal fold lesion?

- ☐ Yes
☐ No
☐ Not certain

How was this confirmed? Select all that apply:

- ☐ Laryngoscopy/Stroboscopy
☐ Biopsy/Pathology Report

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

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

Other irritants

4. Disease Severity

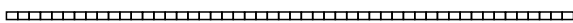
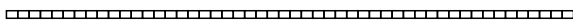
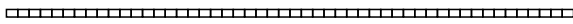
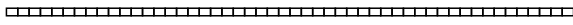
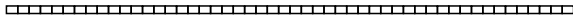
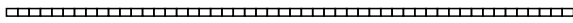
Location of lesion(s)
(Select all that apply).

- ☐ 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 (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 (Indicate the nature of the abnormality):	<hr/>		

Loudness ☐ Consistent ☐ Intermittent

Comments about resonance ☐ Normal ☐ Other

Please specify

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

5. Treatment obtained

Has the participant undergone any treatment for this condition? ☐ Yes ☐ No

What treatments did the participant undergo? (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

Other, please specify

Deprecated Fields

[DEPRECATED]
Does the participant have a precancerous vocal fold lesion confirmed by laryngoscopy/stroboscopy? ☐ Yes ☐ No ☐ Not certain

[DEPRECATED]
Does the participant have a precancerous vocal fold lesion confirmed by biopsy/pathology? ☐ Yes ☐ No ☐ Not certain