

Consulting from



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Name:

Date: ___/___/____

Vocal Cord Dysfunction – Questionnaire (VCD-Q)

This questionnaire developed to help monitor symptoms in clients with a diagnosis of Vocal Cord Dysfunction, or PVFM. These are statements many people have used to describe their breathing symptoms and the effects of these symptoms on their lives. Please circle the response that indicates how much you agree with each statement.

- 1 = Strongly disagree
- 2 = Disagree
- 3 = Neither agree or disagree
- 4 = Agree
- 5 = Strongly agree

Situation	How m	How much do you agree with the statements				
	1	2	3	4	5	
My Symptoms are confined to my throat/upper						
chest.						
I feel like I can't get breath past a certain point in my						
throat/upper chest because of restriction.						
My breathlessness is usually worse when breathing						
in.						
My attacks typically come on very suddenly.						
I feel that there is something in my throat that I						
can't clear.						
My attacks are associated with changes in my voice.						
My breathing can be noisy during attacks.						
I'm aware of other specific triggers that cause						
attacks.						
My symptoms are associated with an ache or itch in						
my throat.						
I am frustrated that my symptoms have not been						
understood correctly.						
I am unable to tolerate any light pressure around the						
neck – e.g. tight clothes or bending the neck						
The attacks impact on my social life						
Total						