

## 腭咽閉合不全之臨床評價

### 主觀檢查

患者姓名：_____	編號：_____
評價日期：_____	評價者：_____

#### 一、倒流

\_\_\_\_\_ 飲食時，沒有液體或固體從鼻子漏出

\_\_\_\_\_ 患者或家人匯報鼻腔漏情況：

\_\_\_\_\_ 液體    \_\_\_\_\_ 固體    \_\_\_\_\_ 兩者皆有

€    \_\_\_\_\_ 偶然(說明：\_\_\_\_\_); 經常(說明：\_\_\_\_\_)

#### 二、面部特殊表情

\_\_\_\_\_ 說話時，沒有面部特殊表情(擠眉或聳鼻)

\_\_\_\_\_ 說話時，有面部特殊表情

\_\_\_\_\_ 在鼻翼或鼻翼周圍；    \_\_\_\_\_ 廣泛地涉及面部

\_\_\_\_\_ 在說話時出現(說明音素，例如：塞音、擦音)\_\_\_\_\_

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### 三、鼻漏氣

\_\_\_ 沒有鼻漏氣情況(可聞性或不可聞性)

\_\_\_ 可聞性鼻漏氣

(說明音素：\_\_\_\_\_)

\_\_\_ 不可聞性鼻漏氣(通過鏡子實驗測出)

(說明音素：\_\_\_\_\_)

\_\_\_ 通過「伸舌測驗」(鏡子實驗沒測出鼻漏氣)

\_\_\_ 不通過「伸舌測驗」(鏡子實驗測出鼻漏氣)

### 四、過高鼻音

說明評價方式，例如：朗讀短文、句子、會話：

\_\_\_\_\_

\_\_\_ 無過高鼻音情況(正常共鳴)

\_\_\_ 有過高鼻音情況

\_\_\_ 非常輕微 \_\_\_ 輕微 \_\_\_ 中度 \_\_\_ 嚴重

\_\_\_ 持續性 \_\_\_ 非持續性(說明：\_\_\_\_\_)

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## 五、 語音障礙

說明評價方式(例如：重複單字、看圖命名、會話)並附上詳細資料

\_\_\_ 正常(切合年齡)

\_\_\_ 與腭咽閉合不全有關的語音錯誤(例如：高壓力口輔音減弱、高  
壓力口輔音遺漏、代償性發音習慣)

\_\_\_ 其他語音錯誤(說明可能產生原因)

## 總結

甲、 主觀檢查提示：

\_\_\_ 腭咽閉合在正常範圍內

\_\_\_ 可能腭咽閉合不全

\_\_\_ 暫時未能確定(說明原因：\_\_\_\_\_)

乙、 建議

(例如：再做主觀檢查(指定日期)、儀器檢查、直接觀察說話時的腭咽  
閉合功能、矯治器處置腭咽閉合不全、手術處置腭咽閉合不全及其  
他。)

## Clinical Evaluation of Velopharyngeal Function

### Perceptual Assessment

Patient Name: _____	Patient Number: _____
Date of Evaluation: _____	Name of Examiner: _____

#### 1. Nasal regurgitation

\_\_\_ No report of nasal leakage of liquids or solids while eating or drinking

\_\_\_ Patient/family reports nasal leakage:

\_\_\_ fluids \_\_\_ solids \_\_\_ both

\_\_\_ occasionally (specify: \_\_\_\_\_); frequently (specify: \_\_\_\_\_)

#### 2. Grimace

\_\_\_ No nasal or facial grimace during speech

\_\_\_ Grimace noted during speech

\_\_\_ at or around nares; \_\_\_\_\_ more extensive involvement of face

\_\_\_ noted during production of (specify sounds e.g. plosives, fricatives) \_\_\_\_\_

#### 3. Nasal emission

\_\_\_ No nasal emission noted (auditorilly or visually)

\_\_\_ Audible nasal emission

(Specify for which sounds: \_\_\_\_\_)

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\_\_\_ 'Visible' nasal emission (noted during 'Mirror test')  
(Specify for which sounds: \_\_\_\_\_)

\_\_\_ *Passed 'Modified Tongue Anchor test (no nasal escape on mirror during task)*

\_\_\_ *Failed 'Modified Tongue Anchor test (nasal escape noted on mirror during task)*

**4. Hypernasality**

Specify how assessed e.g. reading a paragraph, reading sentences, conversation:

\_\_\_\_\_

\_\_\_ No evidence of hypernasality (normal resonance)

\_\_\_ Hypernasality noted:

\_\_\_ very mild \_\_\_ mild \_\_\_ moderate \_\_\_ severe

\_\_\_ consistent \_\_\_ inconsistent (explain: \_\_\_\_\_)

**5. Articulation**

Specify how assessed (e.g. word repetition, picture labelling, conversation) and attach details

\_\_\_ Normal (age-appropriate)

\_\_\_ Articulation errors associated with VPI (e.g., weak pressure consonants, omitted pressure consonants, 'compensatory errors').

\_\_\_ Other articulation errors (specify which, and possible cause or contributing factor)

**Summary**

**A. Perceptual evaluation suggests:**

**Clinical Evaluation of Velopharyngeal Function: Perceptual Assessment**

VP function within normal limits

Suspected VPI

Cannot be determined at this time (state  
reason: \_\_\_\_\_)

**B. Recommendation:**

(e.g. perceptual re-evaluation (state when), instrumental evaluation, direct examination of velopharyngeal port during speech, prosthetic management of VPI, surgical management of VPI, other).