PROCEDURE APPENDIX

NASOMETER

To assess the amount of sound coming from your child’s nose, a computer program called the Nasometer may be used. The procedure involves having your child wear a headset which has two microphones separated by a plate. Your child will be asked to repeat a series of words or sentences. One microphone picks up the sound coming from the nose, while the other microphone picks up the sound generated from the mouth.

The speech signal can then be measured to determine if results fall within normal ranges. By using this procedure, the Speech-Language Pathologist has a permanent record of your child’s scores which can be used for future comparisons.

MULTIVIEW VIDEOFLUOROSCOPY

Multiview Videofluoroscopy is an x-ray test used to look at how the soft palate works during speech. It may be recommended for children whose speech is excessively nasal so that the right type of treatment, such as speech therapy or surgery, can be chosen. The test is done by a Speech-Language Pathologist together with a Radiologist.

A small amount of barium (white chalky liquid) is placed in each nostril. This helps to outline the structures more clearly on the x-ray.

All examinations are audio and video recorded. Your child will wear a lapel microphone in order to document his/her speech during the test.

Your child will be seated and asked to repeat specific sounds, words and sentences. The Radiologist may move the equipment or ask your child to change positions so as to get the best view(s) possible.

Following the examination, the Speech-Language Pathologist will review the results with the Radiologist. This information is shared with your child’s Plastic Surgeon and if necessary, arrangements will be made for you to meet with the Plastic Surgeon to discuss the treatment plan.
NASOPHARYNGOSCOPY

Nasopharyngoscopy is a test used to look at how the soft palate works during speech. It is often used when speech is abnormally nasal so that the right type of treatment, such as speech therapy or surgery, can be chosen or evaluated. The test is done by a trained Speech-Language Pathologist.

Before beginning the procedure, your child will be asked to blow his/her nose in order to clear the nasal passages.

The Speech-Language Pathologist will check to see which nostril is clearer by having your child sniff in from one nostril while the other nostril is plugged.

In some cases, the nasal passages may need to be cleared more by using a nasal decongestant spray.

To numb the inside of the nose, a thin strip of cotton is soaked in a liquid anaesthetic solution and inserted into the clearer nostril for a few minutes. Your child may eat or drink before the test, but should not eat or drink for at least one hour after the test. This allows time for the topical anaesthetic to wear off.

All examinations are audio and video recorded. Your child will wear a lapel microphone in order to document his/her speech during the test.

Every attempt is made to gain the child’s cooperation and participation. Children are familiarized with the equipment and encouraged to watch the procedure on the computer screen. The test is usually painless and most children are fascinated with being able to look at how the muscles at the back of the throat work for speech.

If your child has a fistula (hole) in the roof of the mouth, it may be necessary to cover the hole (e.g., with cotton or gum) to ensure that it does not affect the test results.

A flexible tube (endoscope) attached to a camera is slowly inserted into the child’s nose. The endoscope is roughly the same thickness as a piece of spaghetti, and only a few inches are inserted into the nose. The tube is in the nose for only 2-3 minutes. The entire procedure from start to finish takes approximately 45 minutes, which includes the time needed to prepare your child for the test and to discuss the results and treatment recommendations with you and the Plastic Surgeon.