Cosmo Palandrani 8/8/2026
Margolis / Clarke

NTUAS UPPER AIRWAY EXAM SCORING SHEET

Guide for veterinarians from NTUAS Study Group

NOTE: A full upper airway examination is always recommended and should evaluate the nares,tongue, hard palate, soft palate, tonsils, pharynx (laterally and dorsally), epiglottis, hyoepiglottis and valleculae, cuneiform and corniculate processes, piriform recesses, laryngeal mucosa, vestibular and vocal folds, ventricles, immediate infraglottic lumen. Presence of phlegm, pharyngeal gag, laryngeal sensitivity and laryngeal function should also assessed. Although anatomically not part of the upper airway, it is useful to include the trachea, mainstem bronchi and choanae. The nasal cavity, choanae, nasopharynx and soft palate thickness can be evaluated with CT using a slung maxilla positioning.

Only the variables that significantly correlated with clinical signs of NTUAS are included in the NTUAS score.

			Grade
DORSAL PHARYNGEAL WALL *Ensure that you do not inadvertently elevate the dorsal pharynx when elevating the soft palate.*	NORMAL or MILD	High roof to the pharynx, can see esophageal aditus, or dorsal pharynx may extend down to, but not covering, dorsal commissure of glottis.	0
	MODERATE	Dorsal pharynx displaced ventrally, covering part of the corniculate processes.	(3)
	MARKED	Dorsal pharynx displaced ventrally, cannot see the corniculate processes at all. May be touching the cuneiform processes.	6
SUPRAGLOTTIC LARYNGEAL MUCOSA	NORMAL or MILD	No wrinkles or some wrinkled mucosa, but deep piriform recesses (PR), no redundant laryngeal mucosa covering dorsal commissure of glottis. Can see corniculates and dorsal commissure clearly.	0
	MODERATE	Excess (with folds or wrinkles) or swollen mucosa in the piriform recesses, **but they are still recessed**. Dorsal commissure of glottis and corniculates may be partially covered with mucosal 'scarf'.	(3)
	MARKED	Piriform recesses completely or almost completely obliterated with excessive folds or edematous mucosa. Mucosa may protrude out of the piriform recesses. Corniculates may be covered with excess mucosa. Redundant mucosa may be sucked into the airway.	6
CUNEIFORM PROCESSES *Assess at rest. Ensure that you do not distort the cuneiforms when pressing down on the epiglottis or tongue base*	NORMAL or MILD	Wide or standing upright, may tilt inwards slightly	(0)
	MODERATE	Medially displaced, almost but not *quite* touching	3
	MARKED	Touching, overlapping or medially flattened	5
VENTRICLES *Assess at beginning of exam. Assess at rest, not abduction. If asymmetrical, classify based on more severely affected.* *NOTE: If dog has undergone previous sacculectomy, grade as 5.*	NORMAL	Can see the vocal folds their entire length, and there is a deep cleft entrance to the ventricles immediately rostral to the vocal folds.	0
	SUB-EFFACED	Edematous ventricular mucosa can be seen sitting within the ventricles, but can still see ALL the vocal folds.	1
	EFFACED	Edematous mucosa is bulging to the vocal folds. The ventral aspect of the ventricles may be touching but can still see most of vocal folds.	2
	PARTIALLY EVERTED	Most of vocal folds are obscured by everting/bulging mucosal sacs, which are touching and becoming plump. Can see less than 50% of vocal folds dorsally.	3
	FULLY EVERTED	Mucosa is ballooning out into the rima glottidis, completely obscuring vocal folds and occupying the ventral rima glottidis. Everted mucosal sacs may overlap each other.	(5)
INFRAGLOTTIC LUMEN	NORMAL	O shape, may be a slight V shape	0
	KEYHOLE	Significantly narrowed lumen, especially ventrally, similar to a keyhole or Y shape	(3)

Range = 0-25 **SUM for NTUAS Score:** 14

ADDITIONAL COMMENTS:

GOLD COAST
CENTER FOR VETERINARY CARE
SPECIALISTS IN VETERINARY MEDICINE

Carol Margolis, DVM DACT
Theriogenology
770 West Jericho Turnpike
Huntington, NY 11743

P: 631.923.2530
F: 631.498.6456

theriogenology@goldcoastcvc.com