Tremor is one of the most common movement disorders in the world affecting ~5% of those 60 years of age and older. Approximately 1/3 of those with tremor are estimated to exhibit vocal tremor (VT). VT can occur in isolation, or may co-occur with other neurologic disorders such as essential tremor, dystonia, or Parkinson’s disease. Frequently, severe VT is clinically misclassified as spasmodic dysphonia, more recently referred to as laryngeal dystonia (LD). Improved systematic characterization of VT clinical features is needed for reliable classification and optimal treatment planning. Importantly, greater precision in VT classification would advance insights regarding neural pathways of tremor affecting the limbs versus speech structures potentially leading to development of future novel treatment targets. This presentation will summarize recommended clinical approaches for characterizing and classifying tremor affecting the speech structures.