

F and V practice: same contact, different voicing

F and V are related lip-and-teeth sounds with different voicing. A home plan may target one sound rather than both. Work with familiar words in the selected position and ask the clinician how to respond when a word contains additional difficult sounds.

Key facts

- Educational guide for caregiver discussion, not a diagnostic checklist.
- Intended target and level: the child's individual SLP plan.
- A word's spelling does not reliably identify its sound.
- The examples below use common U.S. English pronunciations; adapt for dialect and language.

Word list by position

F initial: fan, fish, feet, fox; **medial:** muffin, coffee, dolphin, sofa; **final:** leaf, roof, laugh, knife

V initial: van, vase, vest, vine; **medial:** seven, oven, heavy, river; **final:** five, wave, cave, glove

Make a delivery route

Use a toy van to deliver picture cards such as a vest or a glove for V practice. For F, let a fox deliver a fan or a leaf. Choose the sound position first and remove cards that do not fit. A caregiver can model words while the child drives, points, or takes a speaking turn.

Use only words your child understands. Allow pointing, play, or another communication method; participation does not require a spoken response on every turn. Ask your SLP what to model, which cue to use, and whether to practice listening, single words, or phrases. If the child is tired or frustrated, finish the activity and discuss the plan with the clinician. Do not make a practice score a reward or a condition for ending play.

Sound development in context

The U.S. English review places /f/ in the 3-year band and /v/ in the 4-year band at its 90% criterion. This population summary does not diagnose an individual child. Assessment considers communication needs, hearing, languages, dialect, and the whole sound system. If you are concerned, ask a licensed SLP for an evaluation rather than waiting for an app milestone.

Details that matter for this target

Vocabulary and spelling can distract from the target. Knife has a silent K; laugh ends in /f/ despite its spelling. Do not insist on biting the lip or ask a child to force contact. Individual placement cues belong in the clinician's plan.

Using SpeechLP alongside the plan

Use F or V as the selected target and confirm pronunciation of less familiar examples such as vase. SpeechLP offers articulation games and target settings. Confirm that the selected game words fit the clinician's plan before beginning. Automatic feedback can disagree with a listener and is not a diagnostic result or proof of clinical improvement. Use the practice report to discuss what happened, including difficult words, with your SLP.

Printable activity sheet

[Download this printable guide](#), or print the word list and activity on separate pages. Leave out the child's name and any medical details. Circle the clinician-selected words and note the chosen position and activity level privately.

Related reading

- [SpeechLP for families](#)
- [AI articulation practice and its limits](#)
- [Find an SLP](#)
- [SpeechLP product facts](#)

Sources

- [Crowe and McLeod \(2020\), Children's English Consonant Acquisition in the United States](#). Acquisition bands describe a pooled 90% criterion, not mandatory individual treatment ages.
- [ASHA Practice Portal: Speech Sound Disorders](#). Individual assessment and linguistic variation.