CLINICAL EVALUATION

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(III)	_	,

CASE DETAILS

Age:
Gender:
□ Male
□ Female
Diagnosis:
Years of disease history: Predominant side:
□ Left
□ Right
Date of implant:
Target structure:

VITAL SIGNS

Parameter	Unit	Value
Weight	Kg	
Height	m	
BMI	Kg/m ²	
Temperature	C	
Pulse	descriptive	
Systolic Blood Pressure	mmHg	
Diastolic blood pressure	mmHg	
Heart rate	bpm	
ECG	Report (qualitative)	

 \square 0 Absent.

UPDRS MOTOR EXAMINATION

 1. Speech □ 0 Normal. □ 1 Slight loss of expression, diction and/or volume. □ 2 Monotone, slurred but understandable; moderately impaired. □ 3 Marked impairment, difficult to understand. □ 4 Unintelligible.
 2. Facial expression □ 0 Normal. □ 1 Minimal hypomimia, could be normal 'poker face'. □ 2 Slight but definitely abnormal diminution of facial expression. □ 3 Moderate hypomimia; lips parted some of the time. □ 4 Masked or fixed facies with severe or complete loss of facial expression; lips parted ¼ inch or more
 3a. Tremor at rest – Face, lips, chin □ 0 Absent. □ 1 Slight and infrequently present. □ 2 Mild in amplitude and persistent; or moderate in amplitude, but only intermittently present. □ 3 Moderate in amplitude and present most of the time. □ 4 Marked in amplitude and present most of the time.
3b. Tremor at rest – Right hand □ 0 Absent. □ 1 Slight and infrequently present. □ 2 Mild in amplitude and persistent; or moderate in amplitude, but only intermittently present. □ 3 Moderate in amplitude and present most of the time. □ 4 Marked in amplitude and present most of the time.
3c. Tremor at rest – Left hand □ 0 Absent. □ 1 Slight and infrequently present. □ 2 Mild in amplitude and persistent; or moderate in amplitude, but only intermittently present. □ 3 Moderate in amplitude and present most of the time. □ 4 Marked in amplitude and present most of the time.
3d. Tremor at rest – Right foot □ 0 Absent. □ 1 Slight and infrequently present. □ 2 Mild in amplitude and persistent; or moderate in amplitude, but only intermittently present. □ 3 Moderate in amplitude and present most of the time. □ 4 Marked in amplitude and present most of the time.
3e. Tremor at rest – Left foot □ 0 Absent. □ 1 Slight and infrequently present. □ 2 Mild in amplitude and persistent; or moderate in amplitude, but only intermittently present. □ 3 Moderate in amplitude and present most of the time. □ 4 Marked in amplitude and present most of the time.
4a. Action or postural tremor of hands – Right hand

- □ 3 Marked, but full range of motion easily achieved.
- □ 4 Severe; range of motion achieved with difficulty.

5e. Rigidity – Left lower extremity (judged on passive movement of major joints with patient relaxed in sitting position; cogwhelling to be ignored)

- \square 0 Absent.
- □ 1 Slight or detectable only when activated by mirror or other movements.
- □ 2 Mild to moderate.
- □ 3 Marked, but full range of motion easily achieved.
- □ 4 Severe; range of motion achieved with difficulty.

6a. Finger taps – Right hand (patient taps thumb with index finger in rapid succession)

□ 0 Normal.

 □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in movement. □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in ongoing movement. □ 4 Can barely perform the task. 	
6b. Finger taps – Left hand (patient taps thumb with index finger in rapid succession) □ 0 Normal. □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in movement. □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in ongoing movement. □ 4 Can barely perform the task.	
 7a. Hand movements – Right hand (patient opens and closes hands in rapid succession) □ 0 Normal. □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in movement. □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in ongoing movement. □ 4 Can barely perform the task. 	
7b. Hand movements – Left hand (patient opens and closes hands in rapid succession) □ 0 Normal. □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in movement. □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in ongoing movement. □ 4 Can barely perform the task.	
8a. Rapid alternating movements of hands – Right hand (pronation-supination movements of han vertically and horizontally, with as large an amplitude as possible, both hands simultaneously) □ 0 Normal. □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in movement. □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in ongoing movement. □ 4 Can barely perform the task.	ds
8b. Rapid alternating movements of hands – Left hand (pronation-supination movements of hand vertically and horizontally, with as large an amplitude as possible, both hands simultaneously) □ 0 Normal. □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in movement. □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in ongoing movement. □ 4 Can barely perform the task.	š ,
 9a. Leg agility – Right leg (patient taps heel on the ground in rapid succession, picking up entire least amplitude should be at least 3 inches) □ 0 Normal. □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in movement. □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in ongoing movement. □ 4 Can barely perform the task. 	g

9b. Leg agility – Left leg (patient taps heel on the ground in rapid succession, picking up entire leg; amplitude should be at least 3 inches)

□ 0 Normal.

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 □ 1 Mild showing and/or reduction in amplitude. □ 2 Moderately impaired; definite and early fatiguing; may have occasional arrests in □ 3 Severely impaired; frequent hesitation in initiating movements or arrests in □ 4 Can barely perform the task. 	
10. Arising from chair (patient attemps to rise from a straight-backed chair	r, with arms folded across
chest)	
□ 0 Normal. □ 1 Slow; or may need more than one attempt.	
□ 2 Pushes self up from arms of seat.	
□ 3 Tends to fall back and may have to try more than one time, but can get up w □ 4 Unable to arise without help.	vithout help.
11. Posture	
□ 0 Normal.	
□ 1 Not quite erect, slightly stooped posture; could be normal for older person. □ 2 Moderately stooped posture, definitely abnormal,; can be slightly leaning to	one side
□ 3 Severely stooped posture, definitely abnormal,, can be slightly learning to one s	
□ 4 Marked flexion with extreme abnormality of posture.	
12. Gait	
□ 0 Normal.	
□ 1 Walks slowly; may shuffle with short steps, but no festination or propulsion □ 2 Walks with difficulty, but requires little or no assistance; may have some fe	
propulsion .	, 1
□ 3 Severe disturbance of gait requiring assistance.	
□ 4 Cannot walk at all, even with assistance.	
13. Posture stability (response to sudden, strong posterior displacement pro	
while patient erect with eyes open and feet slightly apart; patient is prepare 0 Normal erect.	ea)
□ 1 Retropulsion, but recovers unaided.	
□ 2 Absence of postural response; would fall if not caught by examiner.	
□ 3 Very unstable, tends to lose balance spontaneously. □ 4 Unable to stand without assistance.	
1 4 Onable to stand without assistance.	
14. Body bradykinesia and hypokinesia (combining slowness, hesitancy, de amplitude, and poverty of movement in general)	cresed arm swing, small
□ 0 None.	
□ 1 Minimal slowness, giving movement a deliberate character; could be normal	al for some persons; possibly

Score:

reduced amplitude.

reduced amplitude.

□ 3 Moderate slowness, poverty or small amplitude of movement. □ 4 Marked slowness, poverty or small amplitude of movement.

□ 2 Mild degree of slowness and poverty of movement which is definitely abnormal. Alternatively, some

INTENSITY SCALE: IMPAIRMENT

- 0=No dyskinesia
- 1=Questionable or mild dyskinesia
- 2=Moderate dyskinesia with movements which are not intrusive nor distort voluntary movements
- 3=Severe dyskinesia which disturbs but does not prohibit posture or voluntary movements
- 4=Incapacitating dyskinesia which prohibits some postures and voluntary movements

IMPAIRMENT	Communication	Ambulation	Highest
SCORE			score
FACE			
NECK			
R ARM/SHOULDER			
L ARM/SHOULDER			
TRUNK			
R LEG/HIP			
L LEG/HIP			

DISABILITY SCALE

Communication

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- □ 1 Dyskinesia present but does not impair communication
- □ 2 Dyskinesia impairs communication but patient is fully understandable
- □ 3 Dyskinesia interferes with communication such that parts of communication cannot be understood but overall content is understandable
- □ 4 Dyskinesia interferes with comprehension of overall communication

Ambulation
□ 0 No dyskinesia observed
□ 1 Mild dyskinesia present but does not alter normal synchrony or cadence
□ 2 Dyskinesia is present which alters the normal cadence of rising, sitting or walking but does not slow overall performance.
□ 3 Dyskinesia is present which disrupts or distorts arising, sitting or walking. Performance is slowed. Patient is able to rise and walk without imminent danger of falling.
□ 4 Dyskinesia prohibits walking safely without assistance
Score:

Considering all of the activities above:

Patient exhibits: (check all applicable answers)

□ On dyskinesia □ Off dystonia □ Transition state (neither clearly On or Off □ No dyskinesia or dystonia

What movements were seen? (check all types)

□ chorea □ dystonia □ Other

The predominant dyskinesia was (check one)

□ chorea □ dystonia □ Other