

INITIAL VISIT PACKET NACC UNIFORM DATA SET (UDS) **LBD MODULE**

Form B3L: UPDRS Part III — Motor Examination¹

ADC name: _____ Subject ID: _____ Form date: ____ / ____ / _____
 Visit #: _____ Examiner's initials: _____

INSTRUCTIONS: This form is to be completed by the clinician or other trained health professional. For additional clarification and examples, see LBD Module Coding Guidebook for Initial Visit Packet, Form B3L. Check only one box per question.

<p>1. Speech</p>
<p><input type="checkbox"/>₀ Normal.</p> <p><input type="checkbox"/>₁ Slight loss of expression, diction, and/or volume.</p> <p><input type="checkbox"/>₂ Monotone, slurred but understandable; moderately impaired.</p> <p><input type="checkbox"/>₃ Marked impairment, difficult to understand.</p> <p><input type="checkbox"/>₄ Unintelligible.</p> <p><input type="checkbox"/>₈ Untestable. (SPECIFY REASON): _____</p>
<p>2. Facial expression</p>
<p><input type="checkbox"/>₀ Normal.</p> <p><input type="checkbox"/>₁ Minimal hypomimia, could be normal “poker face.”</p> <p><input type="checkbox"/>₂ Slight but definitely abnormal diminution of facial expression.</p> <p><input type="checkbox"/>₃ Moderate hypomimia; lips parted some of the time.</p> <p><input type="checkbox"/>₄ Masked or fixed facies with severe or complete loss of facial expression; lips parted 1/4 inch or more.</p> <p><input type="checkbox"/>₈ Untestable. (SPECIFY REASON): _____</p>
<p>3. Tremor at rest</p>
<p>3a. Face, lips, chin</p> <p><input type="checkbox"/>₀ Absent.</p> <p><input type="checkbox"/>₁ Slight and infrequently present.</p> <p><input type="checkbox"/>₂ Mild in amplitude and persistent. Or moderate in amplitude, but only intermittently present.</p> <p><input type="checkbox"/>₃ Moderate in amplitude and present most of the time.</p> <p><input type="checkbox"/>₄ Marked in amplitude and present most of the time.</p> <p><input type="checkbox"/>₈ Untestable. (SPECIFY REASON): _____</p>

¹Fahn S, Elton RL, UPDRS Development Committee. The Unified Parkinson's Disease Rating Scale. In Fahn S, Marsden CD, Calne DB, Goldstein M, eds. Recent developments in Parkinson's disease, Vol. 2. Florham Park, NJ: Macmillan Healthcare Information, 1987:153-163, 293-304. Reproduced by permission of the author.

Tremor at rest (CONTINUED)**3b. 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.
- 8 Untestable. (SPECIFY REASON): _____

3c. 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.
- 8 Untestable. (SPECIFY REASON): _____

3d. 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.
- 8 Untestable. (SPECIFY REASON): _____

3e. 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.
- 8 Untestable. (SPECIFY REASON): _____

4. Action or postural tremor of hands**4a. Right hand**

- 0 Absent.
- 1 Slight; present with action.
- 2 Moderate in amplitude, present with action.
- 3 Moderate in amplitude with posture holding as well as action.
- 4 Marked in amplitude; interferes with feeding.
- 8 Untestable. (SPECIFY REASON): _____

4b. Left hand

- 0 Absent.
- 1 Slight; present with action.
- 2 Moderate in amplitude, present with action.
- 3 Moderate in amplitude with posture holding as well as action.
- 4 Marked in amplitude; interferes with feeding.
- 8 Untestable. (SPECIFY REASON): _____

5. Rigidity

(Judged on passive movement of major joints with participant relaxed in sitting position. Cogwheeling to be ignored.)

5a. Neck

- 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.
- 8 Untestable. (SPECIFY REASON): _____

5b. Right upper extremity

- 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.
- 8 Untestable. (SPECIFY REASON): _____

Rigidity (CONTINUED)**5c. Left upper extremity**

- 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.
- 8 Untestable. (SPECIFY REASON): _____

5d. Right lower extremity

- 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.
- 8 Untestable. (SPECIFY REASON): _____

5e. Left lower extremity

- 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.
- 8 Untestable. (SPECIFY REASON): _____

6. Finger taps

(Participant taps thumb with index finger in rapid succession with widest amplitude possible, each hand separately.)

6a. Right hand

- 0 Normal.
- 1 Mild slowing 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.
- 8 Untestable. (SPECIFY REASON): _____

Finger taps (CONTINUED)**6b. Left hand**

- 0 Normal.
- 1 Mild slowing 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.
- 8 Untestable. (SPECIFY REASON): _____

7. Hand movements

(Participant opens and closes hands in rapid succession with widest amplitude possible, each hand separately.)

7a. Right hand

- 0 Normal.
- 1 Mild slowing 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.
- 8 Untestable. (SPECIFY REASON): _____

7b. Left hand

- 0 Normal.
- 1 Mild slowing 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.
- 8 Untestable. (SPECIFY REASON): _____

8. Rapid alternating movements of hands

(Pronation-supination movements of hands, vertically or horizontally, with as large an amplitude as possible, both hands simultaneously.)

8a. Right hand

- 0 Normal.
- 1 Mild slowing 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.
- 8 Untestable. (SPECIFY REASON): _____

Rapid alternating movements of hands (CONTINUED)**8b. Left hand**

- ₀ Normal.
- ₁ Mild slowing 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.
- ₈ Untestable. (SPECIFY REASON): _____

9. Leg agility

(Participant taps heel on ground in rapid succession, picking up entire leg. Amplitude should be about 3 inches.)

9a. Right leg

- ₀ Normal.
- ₁ Mild slowing 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.
- ₈ Untestable. (SPECIFY REASON): _____

9b. Left leg

- ₀ Normal.
- ₁ Mild slowing 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.
- ₈ Untestable. (SPECIFY REASON): _____

10. Arising from chair

(Participant attempts to arise from a straight-back wood or metal chair 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 without help.
- ₄ Unable to arise without help.
- ₈ Untestable. (SPECIFY REASON): _____

11. Posture

- 0 Normal erect.
- 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 with kyphosis; can be moderately leaning to one side.
- 4 Marked flexion with extreme abnormality of posture.
- 8 Untestable. (SPECIFY REASON): _____

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 festination, short steps, or propulsion.
- 3 Severe disturbance of gait, requiring assistance.
- 4 Cannot walk at all, even with assistance.
- 8 Untestable. (SPECIFY REASON): _____

13. Postural stability

(Response to sudden posterior displacement produced by pull on shoulders while participant erect with eyes open and feet slightly apart. Participant is prepared.)

- 0 Normal.
- 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.
- 8 Untestable. (SPECIFY REASON): _____

14. Body bradykinesia and hypokinesia

(Combining slowness, hesitancy, decreased armswing, small amplitude, and poverty of movement in general.)

- 0 None.
- 1 Minimal slowness, giving movement a deliberate character; could be normal for some persons. Possibly reduced amplitude.
- 2 Mild degree of slowness and poverty of movement which is definitely abnormal. Alternatively, some reduced amplitude.
- 3 Moderate slowness, poverty, or small amplitude of movement.
- 4 Marked slowness, poverty, or small amplitude of movement.
- 8 Untestable. (SPECIFY REASON): _____

15. Modified Hoehn and Yahr staging

- 0 Stage 0 = No signs of disease.
- 1 Stage 1 = Unilateral disease.
- 2 Stage 1.5 = Unilateral plus axial involvement.
- 3 Stage 2 = Bilateral disease, without impairment of balance.
- 4 Stage 2.5 = Mild bilateral disease, with recovery on pull test.
- 5 Stage 3 = Mild to moderate bilateral disease; some postural instability; physically independent.
- 6 Stage 4 = Severe disability; still able to walk or stand unassisted.
- 7 Stage 5 = Wheelchair-bound or bedridden unless aided.
- 8 Untestable. (SPECIFY REASON): _____