

# MOVEMENT DISORDERS NOTE TEMPLATE

## HPI:

Motor Symptoms:

Onset of symptoms

Presenting symptoms

Laterality

Falls

PD symptoms: (stiffness/tremor/slowness/gait/falls)

Medication dosing: (formulation, dose, times of day taken)

Medication SE: nausea, motor fluctuations, dyskinesia, hallucinations, impulse control disorders (ICDs), dopamine dysregulation syndrome (DDS).

Non-motor symptoms:

Memory/ cognition:

Mood (Depression/ Anxiety):

Psychotic symptoms:

Sense of smell:

Bowel/ bladder:

Positional light-headedness:

Sleep/ REM sleep behavior disorder:

Pain:

There is (+/-) family history of neurologic disease including Parkinson disease, tremor or gait difficulty. There is (+/-) history of exposure to neuroleptics or antiemetics.

## ROS:

**Neuro/Psych Medications:**

**Other Medications:**

**PMH:**

**PSH:**

**Social History:**

lives ...

works as a ...

highest level of education is ....

Tobacco:

EtOH:

Illicit drugs:

Exercise:

**Family History:** (include movement, neurologic, psychiatric, or developmental disorders)

**Physical Exam:**

BP Sitting: \*\*\* BP Standing: \*\*\*

Gen: NAD. Well appearing.

HEENT: Moist mucous membranes. Non-icteric sclera.

Neck: Supple.

Skin: Warm and dry

CV: RRR

Ext: No clubbing, cyanosis, or edema.

**Neurologic Exam:**

Mental Status: MoCA (if applicable, see below). Alert and oriented x3. Attention is intact.

Memory and recall are intact. There is no evidence of neglect. There is no apraxia. Language testing shows normal naming, repetition, fluency, and comprehension. Fund of knowledge is intact.

Cranial Nerves: Pupils are equal and reactive to light. Eye movements are normal with smooth pursuits and quick saccades. Fundoscopic exam demonstrates sharp optic discs and normal vasculature. Visual acuity is intact. Visual fields are full to confrontation. Facial sensation is symmetric to light touch. Facial activation is symmetric and full. Hearing is intact to conversation. Palate elevates symmetrically and uvula is midline. Shoulder shrug is 5/5 power bilaterally. Tongue is midline.

Motor: Muscle power is 5/5 symmetrically in proximal and distal muscle groups of all extremities.

Sensory: Pinprick, temperature, vibration, proprioception, and fine touch were symmetric and intact.

Reflexes: Biceps, triceps, brachioradialis, patellar, and achilles reflexes are 2+ and symmetric. Toes are down-going to plantar stimulation.

Coordination: Finger-to-nose and heel-to-shin movements are smooth, without ataxia or dysmetria.

Movement Exam: (see UPDRS below)

Facial expression, blink rate, voice volume, smooth pursuits, voluntary saccades, SWJ

Frontal release signs -snout, palmomental, glabellar reflexes

Rest, action, postural tremor

Handwriting, spirals

Tone

Rapid alternative movements are fast with normal and sustained amplitude (finger tapping, fist open-close, pronate-supinate, toe tapping, heel stomping)

Gait & station (posture, stance, stride, heel strike, turning, arm swing, presence of FOG on standing, thresholds, turns, straight walking).

Tandem walking

Pull test

**Other Studies:**

Imaging: \*\*\*

Labs/Other Studies: \*\*\*

**Assessment/Plan:**

Recommendations:

Discussed with attending, Dr. \*\*\*

**United Parkinson's Disease Rating Scale (motor only)**

	Date		Date		Date	
	On	Off	On	Off	On	Off
Speech						
Facial Expression						
Rest Tremor Chin/Jaw						
Rest Tremor R Arm						
Rest Tremor L Arm						
Rest Tremor R Leg						
Rest Tremor L Leg						
Action Tremor R arm						
Action Tremor L arm						
Neck Rigidity						
R Arm Rigidity						
L Arm Rigidity						
R Leg Rigidity						
L Leg Rigidity						
R Finger Taps						
L Finger Taps						
R Hand Grips						
L Hand Grips						
R Pronation/Supination						
L Pronation/Supination						
R Heel Taps						
L Heel Taps						
R Toe Taps						
L Toe Taps						

Arising from Chair						
Posture						
Gait						
Postural Instability						
Body Bradykinesia						
<b>Total Motor Score</b>						

**MODIFIED H&Y STAGES:**

- Stage 0: No signs of disease
- Stage 1.0: Symptoms are very mild; unilateral involvement only
- Stage 1.5: Unilateral and axial involvement
- Stage 2: Bilateral involvement without impairment of balance
- Stage 2.5: Mild bilateral disease with recovery on pull test
- Stage 3: Mild to moderate bilateral disease; some postural instability; physically independent
- Stage 4: Severe disability; still able to walk or stand unassisted
- Stage 5: Wheelchair bound or bedridden unless aided

**MOCA (if applicable)**

VISUOSPATIAL

- 0/1 Trails A&B
- 0/1 Cube
- 0/3 Clock draw (contour, numbers, hands)

NAMING

- 0/3 Naming

ATTENTION

- 0/2 Digit span
- 0/1 Vigilance
- 0/3 Serial 7's

LANGUAGE

- 0/2 Repetition
- 0/1 Fluency

ABSTRACTION

- 0/2 Abstraction

DELAYED RECALL

- 0/5 delayed recall

ORIENTATION

- 0/6 orientation

Score -/30

(+1 if <12 yrs education, 26 and up is nl)