

PPMI

1 3 2

DIAGNOSTIC FEATURES (PD)

1 7

SUBJECT ID VISIT NO

INITIALS SITE NO VISIT DATE

MM DD YYYY

Factors Suggesting a Diagnosis: Questions below are based on the **INVESTIGATOR's** opinion. Which of the following features are present and therefore might have an impact on the correct diagnosis?

Answer 0 = No or 1 = Yes for each item.

1. Excessive stroke risk factors (e.g., diabetes, hypertension, cardiovascular disease) or past symptoms suggestive of cerebrovascular disease 1.
2. Unusual or atypical risk factors, exposure, or past history (e.g., drug exposure, acute or chronic toxin exposure, acute infection preceding parkinsonism, repeated head trauma, boxer) 2.
3. **Unusual or atypical presenting features or symptoms** 3.
4. Unusual or atypical course of disease:
 - 4.1 Very rapid progression 4.1
 - 4.2 Static or little change 4.2
 - 4.3 Hemiparkinsonism longer than 6 years 4.3
 - 4.4 Onset before age 30 4.4
 - 4.5 Other, specify: _____ 4.5

Specific Clinical Features: Answer 0 = No or 1 = Yes for each item.

5. Tremor:
 - 5.1 Resting tremor present and typical for PD 5.1
 - 5.2 Resting tremor absent 5.2
 - 5.3 Prominent action tremor 5.3
 - 5.4 Other, specify: _____ 5.4
6. Rigidity:
 - 6.1 Rigidity is present and typical for PD 6.1
 - 6.2 Rigidity is absent 6.2
 - 6.3 Axial rigidity in excess of distal rigidity 6.3
 - 6.4 Marked unilateral or asymmetric rigidity 6.4
 - 6.5 Additional type of increased tone (i.e., paratonia, mitgehen, spasticity) 6.5
 - 6.6 Other, specify: _____ 6.6

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- | | | |
|------|--|---------------------------|
| 7. | Akinesia/Bradykinesia: | |
| 7.1 | Bradykinesia is present and typical for PD | 7.1 <input type="text"/> |
| 7.2 | Bradykinesia is absent | 7.2 <input type="text"/> |
| 7.3 | Pure Akinesia (without rigidity or tremor) | 7.3 <input type="text"/> |
| 7.4 | Bradykinesia does not completely account for difficulty with rapid successive movements (e.g., apraxia, ataxia, pyramidal tract dysfunction) | 7.4 <input type="text"/> |
| 7.5 | Other, specify: _____ | 7.5 <input type="text"/> |
| 8. | Postural or gait disturbances: | |
| 8.1 | Postural and gait disturbances are completely typical of PD | 8.1 <input type="text"/> |
| 8.2 | Wide-based gait or ataxia | 8.2 <input type="text"/> |
| 8.3 | Prominent freezing early in course | 8.3 <input type="text"/> |
| 8.4 | Likely to fall if not extra careful | 8.4 <input type="text"/> |
| 8.5 | Other, specify: _____ | 8.5 <input type="text"/> |
| 9. | Mental Changes: | |
| 9.1 | Psychiatric | 9.1 <input type="text"/> |
| 9.2 | Cognitive | 9.2 <input type="text"/> |
| 10. | Other hyperkinesias (not related to levodopa or agonists): | |
| 10.1 | Dystonia | 10.1 <input type="text"/> |
| 10.2 | Chorea | 10.2 <input type="text"/> |
| 10.3 | Myoclonus (include stimulus-induced) | 10.3 <input type="text"/> |
| 10.4 | Other (e.g., alien limbs): _____ | 10.4 <input type="text"/> |
| 11. | Presence of body hemiatrophy | 11. <input type="text"/> |
| 12. | Autonomic disturbances: | |
| 12.1 | Postural hypotension | 12.1 <input type="text"/> |
| 12.2 | Sexual dysfunction | 12.2 <input type="text"/> |
| 12.3 | Urinary dysfunction | 12.3 <input type="text"/> |
| 12.4 | Bowel dysfunction | 12.4 <input type="text"/> |

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- 13. Oculomotor disturbances 13.
- 14. Eyelid disturbances (e.g., "apraxia" of lid opening, blepharospasm) 14.
- 15. Other neurological abnormalities atypical of parkinsonism (e.g., hyperreflexia, Babinski sign, sensory deficit, amyotrophy, limb apraxia, sleep apnea, dysmetria or other cerebellar dysfunction) 15.
- 16. Little or no response to levodopa or a dopamine agonist (Enter N if never treated with dopaminergic medications) 16.
- 17. Presence of very rapid speech (tachyphemia) 17.
- 18. Presence of dysphagia or other bulbar dysfunction 18.
- 19. CT is suggestive of another cause of parkinsonism (Enter N if CT not done) 19.
- 20. MRI is suggestive of another cause of parkinsonism (Enter N if MRI not done) 20.
- 21. Is there anything unusual or atypical about this subject's disease (e.g., presentation, symptoms, signs, course, response to therapy, etc.) which could indicate an alternative diagnosis to Parkinson's disease (i.e., idiopathic parkinsonism with the presence of Lewy bodies in the substantia nigra), no matter how remote? 21.

Examiner
STAFF CODE