ECDEU ASSESSMENT MANUAL FOR PSYCHOPHARMACOLOGY Revised, 1976

DATE DUE

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U.S. DEPARTMENT OF HEALTH, EDUCATION, A
Public Health Service
Alcohol, Drug Abuse, and Mental Health Administrat

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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

NATIONAL INSTITUTE OF MENTAL HEALTH

ABNORMAL INVOLUNTARY
MOVEMENT SCALE
(AIMS)

STUDY	PATIENT	FORM	PERIOD	RATER	HOSPITAL
		117			
(1-6)	(7-9)	(10-12)	(13-15)	(16-17)	(79-80)
Service State of the	AND TO BE SHOULD BE	THE RESERVE			1.000

PATIENT'S NAME

RATER

DATE

INSTRUCTIONS:

Complete Examination Procedure (reverse side) before

making ratings.

MOVEMENT RATINGS: Rate highest severity observed. Rate movements that occur upon activation one less than

Code: 0 = None

1 = Minimal, may be extreme normal

2 = Mild 3 = Moderate

	those observed spontaneously.	4 = Severe	
	the surrent condition of his/her reath. Ask patient if he/she	(Circle One)	CARD 01 (18-19)
	 Muscles of Facial Expression e.g., movements of forehead, eyebrows, periorbital area, cheeks; include frowning, blinking, smiling, grimacing 	0 1 2 3 4	(20)
FACIAL AND ORAL MOVEMENTS:	2. Lips and Perioral Area e.g., puckering, pouting, smacking	0 1 2 3 4	(21)
	Jaw e.g., biting, clenching, chewing, mouth opening, lateral movement	0 1 2 3 4	(22)
	4. Tongue Rate only increase in movement both in and out of mouth, NOT inability to sustain movement	0 0 1 1 0 2 3 4	(23)
EXTREMITY MOVEMENTS:	5. Upper (arms, wrists, hands, fingers) Include choreic movements, (i.e., rapid, objectively purposeless, irregular, spontaneous), athetoid movements (i.e., slow, irregular, complex, serpentine). Do NOT include tremor (i.e., repetitive, regular, rhythmic)	0 1 2 3 4	(24)
	Lower (legs, knees, ankles, toes) e.g., lateral knee movement, foot tapping, heel dropping, foot squirming, inversion and eversion of foot	0 1 2 3 4	(25)
TRUNK MOVEMENTS:	7. Neck, shoulders, hips e.g., rocking, twisting, squirming, pelvic gyrations	0 1 2 3 4	(26)
GLOBAL JUDGMENTS:	8. Severity of abnormal movements Constitution of the second of the sec	None, normal 0 Minimal 1 Mild 2 Moderate 3	(27)
	9. Incapacitation due to abnormal movements de la	None, normal 0 Minimal 1 Mild 2	(28)
	s up. Exterive in profile. Observe all body areas again, hips	Moderate 3 Severe 4	
	10. Patient's awareness of abnormal movements Rate only patient's report Aware, no distress Aware, mild distress Aware, moderate distress Aware, severe distress		
DENTAL STATUS:	11. Current problems with teeth and/or dentures		(30)
	12. Does patient usually wear dentures?		(31)

EXAMINATION PROCEDURE

Either before or after completing the Examination Procedure observe the patient unobtrusively, at rest (e.g., in waiting room).

The chair to be used in this examination should be a hard, firm one without arms.

- Ask patient whether there is anything in his/her mouth (i.e., gum, candy, etc.) and if there is, to remove it.
- 2. Ask patient about the <u>current</u> condition of his/her teeth. Ask patient if he/she wears dentures. Do teeth or dentures bother patient now?
- 3. Ask patient whether he/she notices any movements in mouth, face, hands, or feet. If yes, ask to describe and to what extent they <u>currently</u> bother patient or interfere with his/her activities
- 4. Have patient sit in chair with hands on knees, legs slightly apart, and feet flat on floor. (Look at entire body for movements while in this position).
- Ask patient to sit with hands hanging unsupported. If male, between legs, if female and wearing a dress, hanging over knees. (Observe hands and other body areas.)
- 6. Ask patient to open mouth. (Observe tongue at rest within mouth.) Do this twice.
- Ask patient to protrude tongue. (Observe abnormalities of tongue movement.) Do this twice.
- 8. Ask patient to tap thumb, with each finger, as rapidly as possible for 10-15 seconds; separately with right hand, then with left hand. (Observe facial and leg movements.)
 - Flex and extend patient's left and right arms (one at a time.) (Note any rigidity and rate on DOTES.)
 - Ask patient to stand up. (Observe in profile. Observe all body areas again, hips included.)
- 11. Ask patient to extend both arms outstretched in front with palms down. (Observe trunk, legs, and mouth.)
- 12. Have patient walk a few paces, turn, and walk back to chair. (Observe hands and gait.) Do this twice.
- Activated movements