

Motor symptoms:

<u>Bradykinesia:</u>	Score	(total of finger tapping, alternating hand, movements, legs agility, total impression of body bradykinesia)
Absent	0	Symptom not present
Mild	1	Minimal slowness, giving movement a deliberate character; could be normal for some persons. Possibly reduced amplitude.
Moderate	2	Mild degree of slowness and poverty of movement which is definitely abnormal. Alternatively, some reduced amplitude.
Severe	3	Moderate slowness, poverty or small amplitude of movement.
Very severe	4	Marked slowness, poverty or small amplitude of movement.

<u>Tremor:</u>	Score	(total of four limbs)
Absent	0	Symptom not present
Mild	1	Slight and infrequently present.
Moderate	2	Mild in amplitude and persistent. Or moderate in amplitude, but only intermittently present.
Severe	3	Moderate in amplitude and present most of the time.
Very severe	4	Marked in amplitude and present most of the time

<u>Gait:</u>	Score	
Absent	0	Symptom not present
Mild	3	walks slowly, may shuffle with short steps, no festination or propulsion
Moderate	4	with difficulty, little or no assistance, some festination, short steps or propulsion
Severe	5	severe disturbance, frequent assistance
Very severe	6	cannot walk

<u>Balance/postural stability:</u>	Score	
Absent	0	Symptom not present
Mild	4	walks without helps, recovers unaided at pull test
Moderate	5	walks with help, would fall if not caught at pull test
Severe	6	walks with help, falls spontaneously at pull test
Very severe	7	wheelchair bound, unable to stand

<u>Freezing:</u>	Score	
Absent	0	Symptom not present
Mild	4	1-2 seconds – very rarely
Moderate	5	3-10 seconds – rarely
Severe	6	11-30 seconds – often
Very severe	7	≥31 seconds – always

<u>Nocturnal akinesia</u>	Score	
Absent	0	Symptom not present
Mild	1	mild loss of the ability to move (10-20% of the night)
Moderate	2	moderate loss of the ability to move (21-40% of the night)
Severe	3	severe loss of the ability to move (41-60% of the night)
Very severe	4	very severe loss (61-100% of the night)

Non Motor Symptom: (in the past 2 weeks)

<u>Fatigue:</u>	Score	
Absent	0	Symptom not present
Mild	1	Fatigue interferes very rarely with physical functioning/carrying out duties/responsibilities
Moderate	2	Fatigue interferes rarely with physical functioning/carrying out duties/responsibilities
Severe	3	Fatigue interferes often with physical functioning/carrying out duties/responsibilities
Very severe	4	Fatigue interferes always with physical functioning/carrying out duties/responsibilities

<u>Urinary:</u>	Score	
Absent	0	Symptom not present
Mild	1	Very rarely urgency and frequency day/night
Moderate	2	Rarely urgency and frequency day/night
Severe	3	Often urgency and frequency day/night, rarely loss of urine
Very severe	5	Always urgency and frequency day/night, frequent loss of urine

<u>Cognitive impairment:</u>	Score	
Absent	0	Symptom not present
Mild	4	Occasional forgetfulness with partial recollection of events and no other difficulties.
Moderate	5	Moderate memory loss, with disorientation and moderate difficulty handling complex problems. Mild but definite impairment of function at home with need of occasional prompting
Severe	6	Severe memory loss with disorientation for time and often to place. Severe impairment in handling problems.
Very severe	7	Severe memory loss with orientation preserved to person only. Unable to make judgements or solve problems. Requires much help with personal care. Cannot be left alone at all.

<u>Depression/anxiety:</u>	Score	
Absent	0	Symptom not present
Mild	1	Periods of sadness or anxiety greater than normal, never sustained for days or weeks
Moderate	2	Sustained depression or anxiety (1 week or more).
Severe	3	Sustained depression with vegetative symptoms (insomnia, anorexia, weight loss, loss of interest) or sustained anxiety.
Very severe	4	Sustained depression with vegetative symptoms and suicidal thoughts or intent.

<u>Symptomatic Orthostatic Hypotension</u>	Score	
absent	0	Symptom not present
Mild	4	Very rarely dizziness/high headedness/feeling faint/generalized weakness
Moderate	5	Rarely dizziness/high headedness/feeling faint/generalized weakness
Severe	6	Often dizziness/high headedness/feeling faint/generalized weakness and occasional loss of consciousness
Very severe	7	Always dizziness/high headedness/feeling faint/generalized weakness and frequent loss of consciousness

<u>Hallucination or Thought disorder (due to drug intoxication or dementia):</u>	Score	

absent	0	Symptom not present
Mild	4	Vivid dreaming or Hallucinations
Moderate	5	"Benign" hallucinations with insight retained
Severe	6	Occasional to frequent hallucinations or delusions; without insight; could interfere with daily activities
Very severe	7	Persistent hallucinations, delusions, or florid psychosis. Not able to care for self.

Treatment complication: (in the past 2 weeks)

<u>Dyskinesia:</u>	Score	
absent	0	Symptom not present
Mild	2	Dyskinesia present $\leq 25\%$ of on-time, or more but not interfering with daily activities.
Moderate	3	Dyskinesia present 26-50 % of on-time, mildly invalidating
Severe	4	Dyskinesia present 51-75 % of on-time, or less but interfering with daily activities
Very severe	5	Dyskinesia present $\geq 76\%$ of on-time and interfering with daily activities

<u>Dystonia:</u>	Score	(or if present rate the severity of Camptocormia and/or Pisa Syndrome)
absent	0	Symptom not present
Mild	2	Dystonia present less than 30 minutes a day
Moderate	3	Dystonia present less than 60 minutes a day
Severe	4	Dystonia present less than 2 hours a day, with pain
Very severe	5	Dystonia present more than 2 hours a day, with severe pain

<u>ON/OFF:</u>	Score	
absent	0	Symptom not present
Mild	3	Time spent in the OFF state: $\leq 25\%$ of waking day ; fluctuations impact on a few activities
Moderate	4	Time spent in the OFF state: 26-50% of waking day ; fluctuations impact on some activities

Severe	5	Time spent in the OFF state: 51-75% of waking day ; fluctuations impact on many activities
Very severe	6	Time spent in the OFF state: $\geq 76\%$ of waking day ; fluctuations impact on all the activities

<u>Dopamine Dysregulation Syndrome:</u>	Score	
absent	0	Symptom not present
Mild	3	Very rarely automedication/mood disturbance/violent behavior/compulsive behavior
Moderate	4	Rarely automedication/mood disturbance/violent behavior/compulsive behavior
Severe	5	Often automedication/mood disturbance/violent behavior/compulsive behavior
Very severe	6	Always automedication/mood disturbance/violent behavior/compulsive behavior

<u>Disability level:</u>	Score	
absent	0	Able to perform daily activity without problems
Mild	1	Limitations to perform exigent or instrumental daily activities
Moderate	2	Limitations to perform basic daily activities
Severe	4	Needs help to perform some basic daily activities
Very severe	6	Dependent of other persons to perform all basic daily activities