## ABNORMAL INVOLUNTARY MOVEMENT SCALE (AIMS) (Sadimod Adaptation)

Instructions: Complete examination procedure before making ratings. When rating movements, rate highest severity observed. For the definite AIMS score rate movements that occur upon activation one less than those observed spontaneously    Cimpel   The described movements are not present.   Cimpel   The described movements are not present.   Cimpel   The described movements are intermittently present.   Cimpel   The described movements are intermittently present.   Cimpel   The described movements are continuously present.   Active   Passive   AIMS	Patient:	Date:					
highest severity observed. For the definite AIMS score rate movements that occur upon activation one less than those observed spontaneously    Common							
highest severity observed. For the definite AIMS score rate movements that occur upon activation one less than those observed spontaneously    Common	Instructions: Complete examina	ation procedure before making ratings. Wh	nen rating	movement	s. rate		
Discrete   Company   Com							
The described movements are not present.	less than those observed sponta	i e					
I: (minimal)   May be extreme normal		,					
2: (micl)   The described movements are intermittently present.   3: (moderate)   The described movements are present during more then half of the time.   4: (severe)   The described movements are present during more then half of the time.   4: (severe)   The described movements are continuously present   Active   Passive   AIMS   Pascial and Oral Movements   The described movements are continuously present   Active   Passive   AIMS   Active   Passive   AIMS   The described movements are continuously present   Active   Passive   AIMS   Active	SAVARITY SCARAS						
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3: (moderate) The described movements are present during more then half of the time. 4: (severe) The described movements are continuously present    Active   Passive   AIMS			v present				
Active   Passive   AIMS		3: (moderate)					
The described movements are continuously present    Active   Passive   AIMS			ing more th	en half of th	e time.		
Facial and Oral Movements  1. Face (mimic muscles)  Involuntary movements (myoclonias or tics or jerks, also athetotic movements) of the forehead (frowning), eyebrows (pulling up., frowning), eyelids (winking, blinking), cheeks (smile, grimace), corner of mouth or the great period of the forehead (frowning), eyebrows (pulling up., frowning), eyelids (winking, blinking), cheeks (smile, grimace), corner of mouth or the great period of the fings, bitling the lips or murmur, smacking- or sucking the lips, bitling the lips or murmur, smacking- or sucking the lips, bitling the lips or murmur, smacking- or sucking the lips, chewing-, grinding- and crunching movements, repetitive opening the lips, chewing-, grinding- and crunching movements, repetitive opening the lips of the mouth, lateral movements and the lips with the tongue (flycatcher tongue), worm-like irregular movements of the tongue (flycatcher tongue), worm-like irregular movements of the tongue, curling of the tongue, incapable of sticking out one's tongue and holding it in that gosition, bulging of the cheek and the lips with the tongue (floonbon mouth). Do not exclusively score movements during the tongue tasks.  Extremity and Trunk Movements  5. Upper extremities (arms, wrists, hands and fingers)  Repetitive bending, stretching, spreading and closing or rubbing of the fingers, as well as choreatic movements (mostly distal, quick and abrupt, irregular, spontaneous, swaying movements), and so distal athetotic movements (continuous, slow and tonic, snakelike wave-movements, that							
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Pointing the lips, biting the lips or murmur, smacking- or sucking movements.  2 2 2 2 3 3 3 3 3 4 4 4 4 4 4 4 4 4 4 4	2. Lips and around the mouth		0	0	0		
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3. Jaw  Biting-, chewing-, grinding- and crunching movements, repetitive opening and closing of the mouth, lateral movements and other involuntary movements in the temporomandibular joint.  4. In a substitute of the temporomandibular joint.  4. In a substitute of the temporomandibular joint.  5. Upper extremities (arms, wrists, hands and fingers)  Repetitive bending, stretching, spreading and closing or rubbing of the fingers, as well as choreatic movements (mostly distal, quick and abrupt, irregular, spontaneous, jerking movements), sometimes myoclonic (fast and abrupt, often repetitive, spontaneous movements), sometimes myoclonic (fast and abrupt, often repetitive, spontaneous movements, that							
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Biting-, chewing-, grinding- and crunching movements, repetitive opening and closing of the mouth, lateral movements and other involuntary movements in the temporomandibular joint.  4. Tongue  1. 1 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3			4	4	4		
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and closing of the mouth, lateral movements and other involuntary movements in the temporomandibular joint.  4. Tongue  Licking movements, repetitive sticking out of the tongue ('flycatcher tongue'), worm-like irregular movements of the tongue, curling of the tongue, incapable of sticking out one's tongue and holding it in that 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Biting abouting grinding and arrupohing movements repetitive eneming			1	1		
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	muscle- or muscle group contrac	tions) and also distal athetotic					

6. Lower extremities (legs, knees, ankles and toes)  Repetitive bending, stretching, spreading and closing or rubbing of the toes, as well as choreatic movements, sometimes ballistic, sometimes	0	0	0
	1	1	1
	2	2	2
myoclonic and also distal athetotic movements, for instance lateral movement of the knees, the canting, turning and stretching of the foot, making tapping movements on the ground with the front part of the foot or the heel. Can be indistinguishable from akathisia or tremor.	3 4	3 4	3 4
7. Torso (neck, shoulders, hips)  Disturbed posture and gait with swinging and/or jerking and/or twisting and/or swaying movements of the torso, pulling one's shoulders, rotating hip movements and canting the pelvis, contracting the nates/thighs. Also head and neck dyskinesias should be assessed at this place.	0	0	0
	1	1	1
	2	2	2
	3	3	3
	4	4	4
Total score			
Global impression On scoring this sub-item the assessor takes all the information he/she has available as well as all clinical experience into account and expresses the severity of the dyskinesia in a number. When the observed hyperkinetic movements are no true dyskinesias in the opinion of the assessor, he/she should score '1' or '0'.	0	0	0
	1	1	1
	2	2	2
	3	3	3
	4	4	4