

Movement Disorders Checklist

This checklist can be used to help determine if you or someone you know may have signs associated with common movement disorders, including tardive dyskinesia. Please keep in mind that there are many kinds of abnormal movements in individuals and not all are because of medications.

Movement	Description	Observed?
Tremor	Rhythmic shaking of hands, jaw, head, or feet <i>A very rhythmic shaking at 3-6 beats per second may indicate extrapyramidal symptoms or side effects (EPSE). These movements may be visible in the tongue, jaw, hands, or legs.</i>	Yes <input type="checkbox"/>
		No <input type="checkbox"/>
Dystonia	Sustained abnormal posture of neck or trunk <i>Involuntary extension of the back or rotation of the neck over weeks or months is common in tardive dystonia.</i>	Yes <input type="checkbox"/>
		No <input type="checkbox"/>
Akathisia	Restless pacing, leg bouncing or posture shifting <i>Repetitive movements accompanied by a strong feeling of restlessness may indicate a treatable medication side effect of akathisia.</i>	Yes <input type="checkbox"/>
		No <input type="checkbox"/>
Tardive Dyskinesia	Repeated stereotyped movements of the tongue, jaw or lips <i>Examples include chewing movements, tongue darting or lip pursing. TD is typically not rhythmic (i.e., not tremor). These mouth and tongue movements are common signs of tardive dyskinesia.</i>	Yes <input type="checkbox"/>
		No <input type="checkbox"/>
	Writhing, twisting, dancing movements of fingers or toes <i>Repetitive finger and toe movements are common in individuals with tardive dyskinesia (and may appear to be similar to akathisia).</i>	Yes <input type="checkbox"/>
		No <input type="checkbox"/>
	Rocking, jerking, flexing, or thrusting of trunk or hips <i>Stereotyped movements of the trunk, hips, or pelvis may also reflect tardive dyskinesia.</i>	Yes <input type="checkbox"/>
		No <input type="checkbox"/>

If you answered “yes” to one or more of the items above, an evaluation by a psychiatrist or neurologist skilled in movement disorders may be warranted to determine the type of disorder and best treatment options.

If you answered “no” to the items above, but you’re taking an antipsychotic medication, you should still ask your mental health care provider to conduct an examination every 6 to 12 months while you’re on your antipsychotic medication. This examination, the Abnormal Involuntary Movement Scale (AIMS) exam, is designed to assess movements associated with TD. Ask your doctor for regular [AIMS exams](#). Early detection is the best approach.

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