

PATIENT: _____ GEB-DATUM: _____

INTERNATIONAL CO-OPERATIVE ATAXIA RATING SCALE

<u>I: POSTURE AND GAIT DISTURBANCE</u>		SCORE:
<p>1. WALKING CAPACITIES</p> <p>observed during a 10 meter test including a half-turn, near a wall, at about 1,5meter.</p>	<p>0: normal</p> <p>1: almost normal naturally, but <u>unable</u> to walk with feet in <u>tandem position</u></p> <p>2: Walking <u>without support</u>, but clearly abnormal and irregular</p> <p>3: Walking <u>without support</u> but with considerable staggering, difficulties in half turn</p> <p>4: Walking with autonomous support no longer possible, the patient uses <u>episodic support of the wall</u> for a 10 meter test</p> <p>5: Walking only possible <u>with one stick</u></p> <p>6: Walking only possible <u>with two special sticks or with a stroller</u></p> <p>7: Walking only <u>with accompanying person</u></p> <p>8: walking <u>impossible</u> even with accompanying person (wheelchair)</p>	
<p>2: GAIT SPEED</p> <p>observed in patients with preceding scores 1-3, preceding score 4 and up gives automatically score 4 in this test.</p>	<p>0: normal</p> <p>1: <u>slightly</u> reduced</p> <p>2: <u>markedly</u> reduced</p> <p>3: <u>extremely</u> slow</p> <p>4: walking with autonomous support no longer possible</p>	
<p>3: STANDING CAPACITIES, EYES OPEN</p> <p>the patient is asked first to stand on one foot if impossible, to stand with feet in tandem position if impossible to stand with feet together for the natural position the patient is asked to find a comfortable standing position</p>	<p>0: normal, able to stand <u>on one foot</u> more than 10 sec</p> <p>1: able to stand <u>with feet together</u>, but <u>no</u> longer able to stand on <u>one foot more than 10 sec.</u></p> <p>2: able to stand <u>with feet together</u>, but <u>no</u> longer able to stand in <u>tandem position</u></p> <p>3: <u>no longer</u> able to stand <u>with feet together</u>, but able to stand in <u>natural position without support</u>, with no or moderate sway</p> <p>4: standing in <u>natural position without support</u>, with considerable sway and considerable corrections</p>	

II: KINETIC FUNCTIONS		SCORE:
<p>8: KNEE-TIBIA TEST decomposition of movement and intention tremor.</p> <p>The test is performed in the supine position, but the head is tilted, so that visual control is possible. The patient is requested to raise one leg and place the heel on the knee, and then slide the heel down the anterior tibial surface of the resting leg towards the ankle. On reaching the ankle joint, the leg is again raised in the air to a height of approximately 40 cms and the action is repeated. At least 3 movements of each limb must be performed for proper assessment.</p>	<p>0: normal</p> <p>1: lowering of <u>heel in continuous axis</u>, but the movement is decomposed in several phases, without real jerks, or abnormally slow</p> <p>2: lowering jerkily <u>in the axis</u></p> <p>3: lowering jerkily with <u>lateral movements</u></p> <p>4: lowering jerkily <u>with extremely strong lateral movements or test impossible</u></p>	<p>R:</p> <p>L:</p>
<p>9: ACTION TREMOR in the HEEL-TO-KNEE Test</p> <p>Same test as preceeding one: the action tremor of the heel on the knee is specifically observed when the patient holds the heel on the knee for a few seconds before sliding down the anterior tibial surface; visual</p>		

**11: FINGER-TO-NOSE
TEST**
intention tremor

SCOPING OF THE DISTURBANCES OF DRAWING IN THE

<u>III: SPEECH DISORDERS</u>	SCORE:
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15: DYSARTHRIA: