

D - Neuro - Parkinson's Disease

Please complete the survey below.

Thank you!

1. Gold Standard Diagnosis

Does the participant have Parkinson's Disease (Parkinsonism)?

- ☐ Yes
☐ No
☐ Not certain

Does the participant meet the diagnostic criteria for Parkinson's Disease (Parkinsonism) based on presence of:

Category 1 - Parkinsonism

- ☐ Bradykinesia
☐ Tremor
☐ Rigidity

Category 1 Criteria Met

Category 2 - Exclusion criteria

- ☐ Cerebellar abnormalities
☐ Supranuclear gaze palsy
☐ Diagnosis of behavioral variant of frontotemporal dementia or primary progressive aphasia within 5 years of disease onset
☐ Parkinsonian features restricted to the lower limbs for more than 3 years
☐ Treatment with a dopamine receptor blocker or dopamine depleting agent consistent with drug-induced parkinsonism
☐ Absence of a response to high-dose levodopa despite at least moderate disease severity
☐ Cortical sensory loss, clear limb ideomotor apraxia, or progressive aphasia
☐ Normal functional imaging of the dopaminergic system ("DAT scan")
☐ Diagnosis of alternative condition causing parkinsonism which could be causing the symptoms

Category 2 Criteria Met

Category 3 - Supportive criteria

- ☐ Clear beneficial response to dopaminergic therapy
☐ Presence of levodopa-induced dyskinesia
☐ Rest tremor of a limb
☐ The presence of either olfactory loss or cardiac sympathetic denervation on MIBG scintigraphy (although the latter is rarely done in current practice)

Category 3 Criteria Met

Does the participant meet the diagnostic criteria for Parkinson's Disease (Parkinsonism) based on the criteria above?

2. Disease Type

Specify the subtype of Parkinson's Disease in the participant:

- ☐ Idiopathic Parkinson's Disease (IPD)
- ☐ Multiple System Atrophy (MSA)
- ☐ Progressive Supranuclear Palsy (PSP)
- ☐ Corticobasal Degeneration (CBD)
- ☐ Dementia with Lewy Bodies (DLB)
- ☐ Other Parkinsonism or Atypical Parkinsonism
- ☐ Not Sure / Undetermined

If you selected "Other Parkinsonism or Atypical Parkinsonism", please specify:

3. Etiology

What is the suspected or known etiology of Parkinson's disease in the participant?

- ☐ Idiopathic (unknown cause)
- ☐ Familial Parkinson's Disease
- ☐ Environmental factors

If you selected "Familial Parkinson's Disease", please specify the genetic mutation if known:

If you selected "Environmental Factors", please specify if known:

4. Disease Severity

What is the current stage/severity of Parkinson's disease in the participant?

- Hoehn and Yahr Scale:

- ☐ Stage 1 (Unilateral involvement only)
- ☐ Stage 2 (Bilateral involvement without impairment of balance)
- ☐ Stage 3 (Bilateral involvement with mild to moderate impairment of balance)
- ☐ Stage 4 (Severe disability but still able to walk or stand unassisted)
- ☐ Stage 5 (Wheelchair-bound or bedridden unless aided)

5. Motor Assessment

Please provide scores or results from validated cognitive assessment tools:

- ☐ Unified Parkinson's Disease Rating Scale (UPDRS)
- ☐ Other motor assessment tool

Unified Parkinson's Disease Rating Scale (UPDRS)

- ☐ Part I (Intellectual function, mood, behavior) score
- ☐ Part II (Activities of daily living) score
- ☐ Part III (Motor Examination) score
- ☐ Part IV (Motor complications) score

Part I (Intellectual function, mood, behavior) score:

Part II (Activities of daily living) score:

Part III (Motor Examination) score:

Part IV (Motor complications) score:

If you selected "Other motor assessment tool", please specify:

6. Non-Motor Symptoms

Are there significant non-motor symptoms associated with Parkinson's disease in the participant?

- ☐ Yes
☐ No

If you selected "Yes", please specify:

7. Treatment Obtained

Has the participant undergone any treatment for Parkinson's disease?

- ☐ Yes
☐ No

Yes

- ☐ Medications
☐ Non-pharmacological interventions

Medications:

- ☐ Levodopa
☐ Dopamine agonists
☐ MAO-B inhibitors
☐ Amantadine
☐ Other

If you selected "Other", please specify:

Non-pharmacological interventions:

- ☐ Physical therapy
☐ Occupational therapy
☐ Speech therapy
☐ Deep Brain Stimulation (DBS) therapy
☐ Other

If you selected "Other", please specify:
