NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES (NNAMHS) POLICY AND PROCEDURE DIRECTIVE

SUBJECT: MONITORING TARDIVE DYSKINESIA

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ORIGINAL DATE: 07/03/91

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APPROVAL:	Cody L. Phir	nney	_, Agency Director

## I. PURPOSE

To ensure early diagnosis and treatment of Tardive Dyskinesia in consumers receiving anti-psychotic medication.

### II. POLICY

All consumers at risk for Tardive Dyskinesia will be screened at intervals defined in this policy.

### III. DEFINITION

1. Tardive Dyskinesia: A condition occurring in neuroleptic treated consumers characterized by a mixture of orofacial dyskinesias, tics, facial grimacing, truncal or axial muscle involvement, chorea (irregular spasmodic involuntary movements), athetosis (irregular slow purposeless involuntary movements) and dystonias (a state of abnormally increased muscle tension or tone).

2. Neuroleptic: Psychoactive drugs that may be prescribed for the management of psychotic disorders and are capable of causing profound motor effects that were thought to mimic neurologic disorders. Most neuroleptics are anti-psychotics.

### IV. PROCEDURE

- Consumers started on neuroleptics baseline and/or continued on neuroleptics for longer than six (6) months will receive a baseline and an annual exam for Tardive Dyskinesia using the Abnormal Involuntary Movement Scale (AIMS).
- 2. Inpatient AIMS examinations may be done by the physician or can be ordered by the treating physician by entering an order on the physician's order sheet. Inpatients will have the AIMS examination administered by trained Psychiatric Registered Nurse IIs. All consumers on neuroleptic medication for longer than six (6) months will receive an AIMS evaluation prior to discharge, unless an AIMS examination has been done within the last six (6) months. Long-term inpatients will be evaluated semi-annually.
- 3. Outpatient AIMS examinations will be done at least annually on all consumers receiving neuroleptic medication for longer than six (6) months.
- 4. All consumers undergoing decreased dosage taper of neuroleptic medication will receive an AIMs evaluation at least once every six (6) months until the dosage has been stabilized.
- Staff in the inpatient and outpatient departments who have been trained to perform the AIMS examination will administer the examination and will become part of the permanent medical record.
- 6. If the AIMS examination supports the diagnosis of Tardive Dyskinesia, the psychiatrist will document in a progress note the reasons for continuing neuroleptic treatment and that the consumer participated fully in a discussion of the risks and benefits of this treatment.