VIDEO EXAM PROTOCOL

General Instructions

- Remove shoes and socks, roll long pants up to see feet. Remove glasses, if applicable. Remove food or chewing gum from mouth. Pull long hair away from neck in a clip or rubber band.
- Use a tripod. To prevent shadows, avoid strong overhead or back lighting on the subject, more light on face than behind. Video should be taken from straight in front of the participant, except where stated otherwise.
- Each part should be recorded as a separate clip, then put together prior to upload to avoid unnecessary footage.
- Avoid recording the participant's name, date of birth, other identifiers, and people other than the subject or staff.
- Record the following statement at start of video: This is subject Dys#X (state age of subject if Clinportal ID is not available) enrolled at (site name) on (current date & year)."

Part I: Participant is seated in a chair without head support. Feet are resting flat on floor and hands are resting flat in lap. Zoom camera in to capture head and shoulders only. Be sure to capture full face.

- At rest, eyes open for 10 seconds
- At rest, eyes closed gently for 10 seconds
- At rest, after opening eyes, for another 10 seconds
- Squeeze eyes closed, 5 times, for 1 second each, then open eyes and observe for 10 seconds
- 5. Ask participant to repeat each sentence or sound below, one at a time:
 - a. "We mow our lawn all year"
- b. "We eat eggs every day" e. "TaTaTa" f. "GaGaGa"
- c. "He had half a head of hair"

- d. "The puppy bit the tape"
- g. "PaPaPa"

- 6. Ask the participant to hold long vowel sounds:
 - "AHHHHHH" (5 seconds); b. "EEEEEEE" (5 seconds)
- Stick tongue out as far as possible and hold for 5 seconds
- Open and close mouth as wide as possible 2 times
- Ask: "do you have trouble swallowing?" If yes, ask: "occasional or frequent?"
- 10. Ask: "do you choke?" If yes, ask: "occasional or frequent?"

Part II: Participant is seated in a chair without head support. Feet are resting flat on floor and hands are resting flat in lap. Zoom camera out to capture upper body, including head and both upper limbs

- 11. Front view, at rest, eyes closed: instruct participant to let head drift to its most comfortable (dystonic) position, 10 secs
- 12. Front view, at rest, eyes open: instruct participant to keep head straight at midline for 1 minute. Assist verbally if necessary for initial placement. Do not ask participant to reposition if the head drifts.
- 13. Front view, with maximum range of motion, instruct participant to:
 - Turn head to right, then left, both as far as possible, hold each position for 5 secs
 - Tilt ear to right shoulder, then left shoulder, both as far as possible, hold each position for 5 secs
 - Look up and extend neck, then look down and flex neck, both as much as possible, hold each position 5 secs
- 14. Roll sleeves up for both arms, use a stable writing table, do not allow any tricks or compensations, nonactive hand should rest on table without holding paper, viewing video from the front of the participant (participant may put glasses on at this point):
 - Write "TODAY IS A NICE DAY" 3 times with dominant hand on associated recording form
 - b. Write "TODAY IS A NICE DAY" 3 times with non-dominant hand on associated recording form
 - Draw spiral with right hand, then with left hand, on recording form (active hand should not rest on table)
 - Hold tip of pen over dot with right hand for 10 secs, as close as possible. Do not let pen or hand touch surface
 - Hold tip of pen over dot with left hand for 10 secs, as close as possible. Do not let pen or hand touch surface
 - Hold up written page for video
- 15. Extend arms/hands supinated towards camera for 5 secs
- 16. Extend arms/hands pronated towards camera for 5 secs
- 17. Flex elbows and hold hands/arms steady without touching in front of chest, 5 secs eyes open
- 18. Finger-to-nose test, slow enough to capture accuracy, 5 trials for each hand

Part III: Participant stays seated. Zoom camera out further to capture entire body, including head and all limbs

- 19. Finger tapping (thumb and forefinger) 10 times for each hand, as big and fast as possible
- 20. Open and close both hands all the way, simultaneously and rapidly, 5 times
- 21. Tap heel on floor then toe on floor in rapid alternations, 5 repeated pairs each side

Part IV: Participant stands. Zoom camera out further to capture entire body, including head and all limbs

- 22. Standing frontal view (5 seconds)
- 23. Standing lateral (right) view (5 seconds)
- 24. Standing back view (5 seconds)
- 25. Walking at least 10 steps away from camera (posterior view) and at least 10 steps towards camera (front view)
- 26. Walking on toes at least 10 steps away from camera, and on heels at least 10 steps towards camera
- 27. Walking in toe-heel-tandem, at least 10 steps away from camera and at least 10 steps back towards camera

Part V (perform these only if applicable):

- 28. Ask if there is anything that can be done to reduce the severity of the dystonia (sensory trick), and demonstrate
- 29. If participant has a task specific dystonia not captured in protocol above, such as playing musical instrument or chewing, please video record the dystonic symptoms while participant performs such tasks.
- 30. If participant is in "Blepharospasm Tools" protocol, conduct this task: Participant seated. Zoom camera in to capture all of head and shoulders only: At rest, eyes open, for 2 minutes (blink as natural)