answer these questions base	d on how you felt most of the time o	ver the last hour (between 1:01 Pl	M and 2:00
Were you asleep for most of the last hour (between 1:01 PM and 2:00 PM)?		Yes	
* must provide value		No	
			rese
can have in your case. * must provide value Completely OFF	Somewhat ON	Completely ON	
* must provide value	Somewhat ON	Completely ON	30 rese
* must provide value Completely OFF Please move the slider to (between 1:01 PM and 2:0	Somewhat ON indicate how severe dyskinesia were, 0 PM). All the way to the right, or 0, in ut not troublesome, and all the way to	if present, most of the time over ndicates no dyskinesia. Halfway ir	rese the last hou ndicates