



The Parkinson's Exam: What to Expect

Understanding the Movement Disorder Specialist Visit and the Unified Parkinson Disease Rating Scale (UPDRS)

A visit with a movement disorder specialist can feel intimidating—especially when you hear that you will be evaluated using something called the **UPDRS**. Many people worry that they are being “tested” or judged on how well they are doing.

In reality, the UPDRS is **not a test you pass or fail**. It is a structured, standardized way for your specialist to understand how Parkinson's is affecting your body and daily life—so care can be tailored to *you*.

Through the **Wisconsin Parkinson Association**, individuals are encouraged to understand the purpose of the Parkinson's exam so they can arrive informed, prepared, and confident.

The Parkinson's exam is about understanding—not performance.
Your symptoms help guide care.

What Is the UPDRS?

The **Unified Parkinson Disease Rating Scale (UPDRS)** is the most widely used clinical tool for assessing Parkinson's disease. It allows specialists to:

- Track symptoms over time
- Evaluate medication effectiveness
- Identify changes early
- Guide treatment decisions

It creates a **shared language** between clinicians so care is consistent and evidence-based.

What the Visit Typically Looks Like

A UPDRS evaluation is usually part of a **regular clinic visit**, not a separate appointment. The exam is done in a calm, conversational manner and typically takes **15–30 minutes**.

Your specialist may ask whether you are:

- “On” medication (meds working well)
- “Off” medication (meds wearing off)

This context helps interpret what they see.

Part 1: Non-Motor Symptoms & Daily Experience

You may be asked about symptoms such as:

- Sleep quality
- Mood, anxiety, or depression
- Memory or thinking changes
- Hallucinations or vivid dreams
- Pain, constipation, or urinary changes
- Fatigue

These questions matter because **non-motor symptoms often impact quality of life as much as movement**.

Be honest—there are no wrong answers.

Symptoms guide care, not judgment.

Part 2: Activities of Daily Living

Your specialist may ask how Parkinson’s affects everyday tasks, such as:

- Eating and drinking
- Dressing and grooming
- Writing
- Walking and balance
- Speech or facial expression

This helps connect exam findings to real life.

Part 3: The Motor Examination (What Most People Notice)

This is the part most people think of as “the Parkinson’s exam.”

You May Be Asked To:

Observe Resting Tremor

- Sitting quietly with hands relaxed
- Hands resting on your lap

Check Rigidity

- Your provider gently moves your arms or legs
- You may be asked to relax completely

Test Finger & Hand Movements

- Finger tapping
- Opening and closing your hands
- Rapid alternating movements

Evaluate Leg & Foot Movements

- Tapping toes
- Lifting feet while seated

Assess Arising From a Chair

- Standing up from a seated position without using arms (if safe)

Examine Gait & Balance

- Walking down the hallway
- Turning
- Possibly a gentle pull test to assess balance

These movements show how your brain communicates with your muscles—not how hard you’re trying.

Facial Expression, Speech & Posture

Your specialist may observe:

- Facial expressiveness
- Speech volume and clarity
- Posture while sitting or standing
- Arm swing during walking

These observations are subtle but important.

What the Specialist Is *Not* Looking For

They are **not** judging:

- Your effort
- Your strength
- Your attitude
- Whether you are “doing well enough”

They *are* looking for **patterns** that guide treatment.

Why the Exam May Feel Different Each Visit

UPDRS scores can change based on:

- Medication timing
- Fatigue
- Stress
- Sleep quality
- Illness

This is normal. Parkinson’s is **dynamic**, not static.

How UPDRS Results Are Used

Your provider may use results to:

- Adjust medication timing or dose
- Identify wearing-off or dyskinesia
- Recommend therapy (PT, OT, speech)
- Monitor progression over time
- Determine eligibility for advanced therapies

A single score matters less than **trends over time**.

How You Can Prepare for the Visit

Helpful steps include:

- Bring a medication list and schedule
- Note symptom patterns or concerns
- Share changes—even if subtle
- Ask questions

Your lived experience is as important as the exam itself.

A Reassuring Perspective

Many people leave their first UPDRS exam feeling surprised by how **gentle and conversational** it is.

**The Parkinson's exam is a tool for partnership—
helping you and your specialist make informed decisions together.**

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