

PROTOCOL FOR: Extrapyramidal Symptoms (EPS): Care of the Patient at Risk

- POLICY:** 1. Patients receiving antipsychotic medications that have the side effect of extrapyramidal symptoms will be monitored closely for those symptoms.

DESIRED PATIENT

- OUTCOMES:** 1. EPS will be reduced through appropriate interventions.
2. Patient will identify and report signs/symptoms of EPS.

DEFINITIONS: EPS include akathisia, akinesia, dyskinesia/parkinsonism and anticholinergic side effects.

1. Akathisia: feeling of restlessness frequently accompanied with complaints of a twitching or crawling sensation.
 - a. Motor restlessness (subjective or objective)
 - b. Inability to rest
 - c. Sleeplessness
2. Akinesia: impaired motor function.
 - a. Increased muscle tone (stiffness, tightening)
 - b. Cogwheeling
 - c. Postural hypotension
 - d. Heightened affect/fixed expression
 - e. Oculogyric crisis
3. Dyskinesia/Parkinsonism: impairment of the ability to execute voluntary movements.
 - a. Tremor at rest
 - b. Gait disturbance
 - c. Abnormal voluntary movements
 - d. Torticollis

**CLINICAL
ASSESSMENT AND**

- CARE:** 1. Assess for and document signs / symptoms of EPS.
2. Reassure patient that symptoms are a side effect of medication and can be treated.
3. Medicate with *prn* medications for EPS as ordered. Collaborate with MD / pharmacist regarding medication regimen (e.g. maximum dose of anticholinergic meds, change or decrease dose of antipsychotics).
4. Continue supportive care (e.g. sit in center circle for safety, remain with patient to decrease anxiety, encourage use of room for privacy).
5. Encourage participation in medication group.

- PATIENT
TEACHING:** 1. Educate patient about possible side effects of antipsychotic medications and need to report to staff.
2. Teach the patient regarding the plan for treatment of EPS.

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3. Teach the patient techniques for reducing stress/anxiety and to differentiate from EPS.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 12/90

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