

ID #:

**Y G T S S**  
**Yale Global Tic Severity Scale**  
*Yale Child Study Center*

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YALE GLOBAL TIC SEVERITY SCALE

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NAME:

TODAY'S DATE :

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RATER:

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**MOTOR TIC SYMPTOM CHECKLIST** (Check motor tics present during **past week** and **worst ever period**.)

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**CURRENT**

•**Simple Motor Tics** (Rapid, Darting, "Meaningless"):

- ☐ Eye blinking
- ☐ Eye movements
- ☐ Nose movements
- ☐ Mouth movements
- ☐ Facial grimace
- ☐ Head jerks/movements
- ☐ Shoulder shrugs
- ☐ Arm movements
- ☐ Hand movements
- ☐ Abdominal tensing
- ☐ Leg, foot, or toe movements
- ☐ Other (describe):

•**Complex Motor Tics** (Slower, "Purposeful"):

- ☐ Eye movements
- ☐ Mouth movements
- ☐ Facial movements or expressions
- ☐ Head gestures or movements
- ☐ Shoulder movements
- ☐ Arm movements
- ☐ Hand movements
- ☐ Writing tics
- ☐ Dystonic postures
- ☐ Bending or gyrating
- ☐ Rotating
- ☐ Leg or foot or toe movements
- ☐ Blocking
- ☐ Tic related compulsive behaviors  
(touching, tapping, grooming, evening-up)
- ☐ Copropraxia
- ☐ Self-abusive behavior
- ☐ Paroxysms of tics (displays),  
duration \_\_\_\_ seconds
- ☐ Disinhibited behavior (describe):\*
- ☐ Other (describe):

**WORST EVER**

- ☐ Eye blinking
  - ☐ Eye movements
  - ☐ Nose movements
  - ☐ Mouth movements
  - ☐ Facial grimace
  - ☐ Head jerks/movements
  - ☐ Shoulder shrugs
  - ☐ Arm movements
  - ☐ Hand movements
  - ☐ Abdominal tensing
  - ☐ Leg, foot, or toe movements
  - ☐ Other (describe):
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- ☐ Eye movements
  - ☐ Mouth movements
  - ☐ Facial movements or expressions
  - ☐ Head gestures or movements
  - ☐ Shoulder movements
  - ☐ Arm movements
  - ☐ Hand movements
  - ☐ Writing tics
  - ☐ Dystonic postures
  - ☐ Bending or gyrating
  - ☐ Rotating
  - ☐ Leg or foot or toe movements
  - ☐ Blocking
  - ☐ Tic related compulsive behaviors  
(touching, tapping, grooming, evening-up)
  - ☐ Copropraxia
  - ☐ Self-abusive behavior
  - ☐ Paroxysms of tics (displays),  
duration \_\_\_\_ seconds
  - ☐ Disinhibited behavior (describe):\*
  - ☐ Other (describe):

# PHONIC TIC SYMPTOM CHECKLIST (Check phonic tics for **past week** and **worst ever period.**)

## CURRENT

### •Simple Phonic Symptoms (Fast, "Meaningless" Sounds):

☐ Sounds, noises  
(circle: coughing, throat clearing,  
sniffing, or animal or bird noises)

☐ Other (list):

### •Complex Phonic Symptoms (Words, Phrases, Statements):

☐ Syllables (list)

☐ Words (list)

☐ Coprolalia (list)

☐ Echolalia

☐ Palalalia

☐ Blocking

☐ Speech atypicalities (describe)

☐ Disinhibited speech (describe)\*

## WORST EVER

☐ Sounds, noises  
(circle: coughing, throat clearing,  
sniffing, or animal or bird noises)

☐ Other (list):

☐ Syllables (list)

☐ Words (list)

☐ Coprolalia (list)

☐ Echolalia

☐ Palalalia

☐ Blocking

☐ Speech atypicalities (describe)

☐ Disinhibited speech (describe)\*

\* Do not include disinhibitions in ratings of tic behaviors

## NUMBER

	Current		Worst Ever	
	Motor	Phonic	Motor	Phonic
None	0	0	0	0
Single tic	1	1	1	1
Multiple discrete tics (2-5)	2	2	2	2
Multiple discrete tics (>5)	3	3	3	3
Multiple discrete tics plus as least one orchestrated pattern of multiple simultaneous or sequential tics where it is difficult to distinguish discrete tics	4	4	4	4
Multiple discrete tics plus several (>2) orchestrated paroxysms of multiple simultaneous or sequential tics that where it is difficult to distinguish discrete tics	5	5	5	5

## FREQUENCY

	Motor	Phonic	Motor	Phonic
<b>NONE</b> No evidence of specific tic behaviors	0	0	0	0
<b>RARELY</b> Specific tic behaviors have been present during previous week. These behaviors occur infrequently, often not on a daily basis. If bouts of tics occur, they are brief and uncommon.	1	1	1	1
<b>OCCASIONALLY</b> Specific tic behaviors are usually present on a daily basis, but there are long tic-free intervals during the day. Bouts of tics may occur on occasion and are not sustained for more than a few minutes at a time.	2	2	2	2
<b>FREQUENTLY</b> Specific tic behaviors are present on a daily basis. Tic free intervals as long as 3 hours are not uncommon. Bouts of tics occur regularly but may be limited to a single setting.	3	3	3	3
<b>ALMOST ALWAYS</b> Specific tic behaviors are present virtually every waking hour of every day, and periods of sustained tic behaviors occur regularly. Bouts of tics are common and are not limited to a single setting.	4	4	4	4
<b>ALWAYS</b> Specific tic behaviors are present virtually all the time. Tic free intervals are difficult to identify and do not last more than 5 to 10 minutes at most.	5	5	5	5

<b>INTENSITY</b>	<b>Current</b>		<b>Worst Ever</b>	
	<b>Motor</b>	<b>Phonic</b>	<b>Motor</b>	<b>Phonic</b>
<b>ABSENT</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>MINIMAL INTENSITY</b> Tics not visible or audible (based solely on patient's private experience) or tics are less forceful than comparable voluntary actions and are typically not noticed because of their intensity.	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>
<b>MILD INTENSITY</b> Tics are not more forceful than comparable voluntary actions or utterances and are typically not noticed because of their intensity.	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>
<b>MODERATE INTENSITY</b> Tics are more forceful than comparable voluntary actions but are not outside the range of normal expression for comparable voluntary actions or utterances. They may call attention to the individual because of their forceful character.	<b>3</b>	<b>3</b>	<b>3</b>	<b>3</b>
<b>MARKED INTENSITY</b> Tics are more forceful than comparable voluntary actions or utterances and typically have an "exaggerated" character. Such tics frequently call attention to the individual because of their forceful and exaggerated character.	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>
<b>SEVERE INTENSITY</b> Tics are extremely forceful and exaggerated in expression. These tics call attention to the individual and may result in risk of physical injury (accidental, provoked, or self-inflicted) because of their forceful expression.	<b>5</b>	<b>5</b>	<b>5</b>	<b>5</b>

<b>COMPLEXITY</b>	<b>Motor</b>	<b>Phonic</b>	<b>Motor</b>	<b>Phonic</b>
<b>NONE</b> If present, all tics are clearly "simple" (sudden, brief, purposeless) in character.	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>BORDERLINE</b> Some tics are not clearly "simple" in character.	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>
<b>MILD</b> Some tics are clearly "complex" (purposive in appearance) and mimic brief "automatic" behaviors, such as grooming, syllables, or brief meaningful utterances such as "ah huh," "hi" that could be readily camouflaged.	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>
<b>MODERATE</b> Some tics are more "complex" (more purposive and sustained in appearance) and may occur in orchestrated bouts that would be difficult to camouflage but could be rationalized or "explained" as normal behavior or speech (picking, tapping, saying "you bet" or "honey", brief echolalia).	<b>3</b>	<b>3</b>	<b>3</b>	<b>3</b>
<b>MARKED</b> Some tics are very "complex" in character and tend to occur in sustained orchestrated bouts that would be difficult to camouflage and could not be easily rationalized as normal behavior or speech because of their duration and/or their unusual, inappropriate, bizarre or obscene character (a lengthy facial contortion, touching genitals, echolalia, speech atypicalities, longer bouts of saying "what do you mean" repeatedly, or saying "fu" or "sh").	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>
<b>SEVERE</b> Some tics involve lengthy bouts of orchestrated behavior or speech that would be impossible to camouflage or successfully rationalize as normal because of their duration and/or extremely unusual, inappropriate, bizarre or obscene character (lengthy displays or utterances often involving copropraxia, self-abusive behavior, or coprolalia).	<b>5</b>	<b>5</b>	<b>5</b>	<b>5</b>

<b>INTERFERENCE</b>	<b>Motor</b>	<b>Phonic</b>	<b>Motor</b>	<b>Phonic</b>
<b>NONE</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>MINIMAL</b> When tics are present, they do not interrupt the flow of behavior or speech.	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>
<b>MILD</b> When tics are present, they occasionally interrupt the flow of behavior or speech.	<b>2</b>	<b>2</b>	<b>2</b>	<b>2</b>
<b>MODERATE</b> When tics are present, they frequently interrupt the flow of behavior or speech.	<b>3</b>	<b>3</b>	<b>3</b>	<b>3</b>
<b>MARKED</b> When tics are present, they frequently interrupt the flow of behavior or speech, and they occasionally disrupt intended action or communication.	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>
<b>SEVERE</b> When tics are present, they frequently disrupt intended action or communication.	<b>5</b>	<b>5</b>	<b>5</b>	<b>5</b>

<b>IMPAIRMENT</b>	<b>Current</b>	<b>Worst ever</b>
<b>NONE</b>	<b>0</b>	<b>0</b>
<b>MINIMAL</b> Tics associated with subtle difficulties in self-esteem, family life, social acceptance, or school or job functioning (infrequent upset or concern about tics vis a vis the future, periodic, slight increase in family tensions because of tics, friends or acquaintances may occasionally notice or comment about tics in an upsetting way).	<b>10</b>	<b>10</b>
<b>MILD</b> Tics associated with minor difficulties in self-esteem, family life, social acceptance, or school or job functioning.	<b>20</b>	<b>20</b>
<b>MODERATE</b> Tics associated with some clear problems in self-esteem family life, social acceptance, or school or job functioning (episodes of dysphoria, periodic distress and upheaval in the family, frequent teasing by peers or episodic social avoidance, periodic interference in school or job performance because of tics).	<b>30</b>	<b>30</b>
<b>MARKED</b> Tics associated with major difficulties in self-esteem, family life, social acceptance, or school or job functioning.	<b>40</b>	<b>40</b>
<b>SEVERE</b> Tics associated with extreme difficulties in self-esteem, family life, social acceptance, or school or job functioning (severe depression with suicidal ideation, disruption of the family (separation/divorce, residential placement), disruption of social tics - severely restricted life because of social stigma and social avoidance, removal from school or loss of job).	<b>50</b>	<b>50</b>