


Name of Policy: Prevention, Identification and Management of Tardive Dyskinesia			
Policy Number: 3364-160-SD-131		Effective date: July 2025	
Approving Officer: Chief Executive Officer		Original effective date: July 2004	
Responsible Agent: Chair, Department of Psychiatry Administrative Director			
Scope: Outpatient Clinic - Psychiatry			
Key words: tardive dyskinesia, side effects, antipsychotic, medication, abnormal, psychiatry			
	New policy proposal		Minor/technical revision of existing policy
	Major revision of existing policy	X	Reaffirmation of existing policy

(A) Policy statement

Strategies will be used to minimize the risk of tardive dyskinesia (TD) and to identify and treat if it is discovered.

(B) Purpose of Policy

To minimize risk from adverse effects from prolonged use of antipsychotic medications.

(C) Procedure

- (1) Patients will be examined every 3 to 12 months, depending on medication and symptoms, for the appearance of abnormal movements and document findings.
- (2) If patients are noted to have abnormal movements, a differential diagnosis will be considered, including the possibility of TD.
- (3) Findings will be discussed with the patient and/or guardian.
- (4) Patients who have been identified as having symptoms of TD will be:
 - (a) Regularly evaluated with standardized scales,

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- (b) If clinically feasible, consideration will be given to lowering the dose of the medication or changing the medication to an atypical antipsychotic that is less likely to result in TD and/or other appropriate treatments.

Approved by:

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Date

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Date

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Review/Revision Completed by:
Department of Psychiatry Administration

Policies Superseded by this Policy:

- ***ODMH-SD-131***

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