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Scale for the Assessment and Rating of Ataxia (SARA)**

Availability	Freely available at this website: Scale for the Assessment and Rating of Ataxia
Classification:	Core: Friedreich’s Ataxia (FA) Supplemental: Multiple Sclerosis (MS) Supplemental - Highly Recommended: for measuring ataxia for Mitochondrial Disease (Mito)
Short Description of Instrument:	This tool is specifically aimed at and restricted to the evaluation of coordination. Construct measured: Severity of ataxia Generic vs. disease specific: Generic Means of administration: In person by a trained examiner Intended respondent: Patient # of items: 8 # of subscales and names of sub-scales: N/A # of items per sub-scale: N/A
Comments/Special instructions:	Scoring: Scoring is based on a scale of 0-4, 0-6 or 0-8, depending on which item is being tested. A score of 0 indicates a patient’s normal ability to perform the task, while the higher number indicates a patient’s inability to perform the task. Individual instructions, as well as definitions of scores, can be found on the actual scale. SARA consists of eight items, together yielding a total score between 0 (no ataxia) and 40 (most severe ataxia); (1) gait (score 0–8); (2) stance (score 0–6); (3) sitting (score 0–4); (4) speech disturbances (score 0–6); (5) finger chase (score 0–4); (6) nose-finger test (score 0–4); (7) fast alternating hand movements (score 0–4); and (8) heel-shin slide (score 0–4). All limb kinetic functions are rated independently for both sides (items 5–8) and the arithmetic mean of both sides is included in the total score. Semi-quantitatively. Scales vary from 0-4/6/8 Background: The SARA is a clinical scale based on a semiquantitative assessment of cerebellar ataxia on an impairment level. It has eight items: gait, stance, sitting, speech, finger-chase test, nose-finger test, fast alternating movements and heel-shin test. This scale was developed due to the need for a reliable and valid clinical scale measuring the severity of ataxia.
Population / Age Range / Validation:	Patients with incoordination. The test can be performed with reasonable consistency in all age-groups, even in the pediatric population, as long as the patients are able (physically/mentally) to perform these simple movements. No specific mitochondrial disease, although ataxia/incoordination is a common feature of many.
Rationale/ Justification:	Strengths/Weaknesses: SARA has good metric properties and inter-rater reliability, is easy to use and seems to be a promising outcome measure for future clinical trials.

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	<p>Psychometric Properties: This scale has been shown to be a reliable and valid scale for measuring ataxia. Its scores correlate closely with other scales of ataxia, as well as activities of daily living.</p> <p>Administration: Administration time can range from between 5 - 40 minutes, depending upon the ability of the patient.</p>
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