

Hello my name is _____ and I have Parkinson's disease.

Important things to remember when caring for people with Parkinson's

- To avoid serious side effects, **provide Parkinson's medications on time, every time** — do not skip or postpone doses.
- Write down the exact times of day medications are to be administered so doses are given on the same schedule the patient follows at home.
- Do not substitute Parkinson's medications.
- Do not stop levodopa therapy abruptly.
- Resume medications immediately following procedures, unless vomiting or severely incapacitated.
- If an antipsychotic is necessary, use quetiapine (Seroquel[®]) or clozapine (Clozaril[®]).
- Be alert for symptoms of dysphagia (trouble swallowing) and risk of pneumonia.
- Ambulate as soon as medically safe. Patients may require assistance.

The **Aware In Care** campaign aims to help people with Parkinson's get the best care possible during a hospital stay. For more information please visit www.awareincare.org or www.parkinson.bc.ca/awareincare, or call 1.800.668.3330.

Medications that May Be Contraindicated in Parkinson's Disease

Medical Purpose:	Safe Medications:	Medications to Avoid:
Antipsychotics	quetiapine (Seroquel®), clozapine (Clozaril®)	avoid all other typical and atypical antipsychotics
Pain Medication	most are safe to use, but narcotic medications may cause confusion/psychosis and constipation	if patient is taking MAOB inhibitor such as selegiline or rasagiline (Azilect®), avoid meperidine (Demerol®)
Anesthesia	request a consult with the anesthesiologist, surgeon and Parkinson's doctor to determine best anesthesia given your Parkinson's symptoms and medications	if patient is taking MAOB inhibitor such as selegiline or rasagiline (Azilect®), avoid: meperidine (Demerol®), tramadol (Ultram®), droperidol (Inapsine®), methadone (Dolophine®, Methadose®), cyclobenzaprine, halothane
Nausea/ GI Drugs	domperidone (Motilium®), ondansetron (Zofran®), dolasetron (Anzemet®), granisetron (Kytril®)	metoclopramide (Maxeran®), promethazine (Histantil®), droperidol, prochlorperazine (Compazine®), droperidol (Inapsine®), prochlorperazine (Stemetil®)
Antidepressants	fluoxetine (Prozac®), sertraline (Zoloft®), paroxetine (Paxil®), citalopram (Celexa®), escitalopram (Cipralex®), venlafaxine (Effexor®)	aripiprazole (Abilify®)

Special Alert: Drugs such as benzodiazepines, muscle relaxants, bladder control medications and other medications used for sleep and pain may lead to confusion, hallucinations and other symptoms.

Share this with your doctor

If you have a Deep Brain Stimulation device (DBS):

MRI Warning

- MRI should not be performed unless the hospital has MRI experience imaging a DBS device safely and the DBS device is turned to 0.0 volts.
- MRI should never be performed if the pacemaker is placed in the

abdomen or below and MRI should not be used to image structures of the body lower than the head (neck, abdomen, arms, legs or below) as dangerous heating of the lead could occur.

- In order to safely have an MRI with DBS in place, a "Head Transmit/Receive" coil MUST be used. Not all facilities have this coil.

EKG and EEG Warning

- Turn off the DBS device before conducting EKG or EEG.
- Diathermy should be avoided.