Providers’ Quick Fact Sheet: Parkinson's Disease

Please notify my Parkinson’s Doctor that I have been admitted to the hospital

What is Parkinson’s Disease?
Parkinson's disease (PD) is a chronic, progressive, neurological disorder associated with loss of dopamine-generating cells in the brain that results in multiple and often, complex symptoms. It is mainly associated with loss of motor control—tremor, stiffness, slowness of movement, and/or balance problems. However, non-motor symptoms are frequently present. Not every patient with PD has the same symptoms or response to medications. To date there is no known cause and no cure.

Important Nursing/Clinical Care Considerations for the PD patient
- Patients with PD typically need their medications at specific times during the day. Please do not skip doses or postpone doses, unless ordered by a neurologist. To avoid serious side effects and/or help prevent an increase in debilitating motor symptoms, patients should receive their medications on time, every time!
- When ordering medications, please write specific times (i.e. 10:00am, 2:00pm, 6:00pm) as per the patient’s home schedule, instead of frequency (i.e. three times a day).
- Do not stop Parkinson's medications abruptly.
- Resume medications immediately following procedures, unless vomiting or severely incapacitated.
- If an antipsychotic is necessary, use quetiapine (Seroquel) or clozapine (Clozaril).
- To treat nausea, use trimethobenzamide (Tigan) and ondansetron (Zofran).
- Be alert for swallowing problems.
- Do falls risk assessments and prevention.
- Ambulate as soon as medically safe. Patients may need assistance.
- If having trouble getting an EKG, EEG, or using a heart rate monitor, consider that the patient may have a deep brain stimulator. You may need the patient or family caregiver to turn the device off to avoid electrical interference. *Remember to turn device back on as soon as possible!
- In the patient who has a deep brain stimulator, diathermy is contraindicated; MRI only if strict guidelines are followed. Contact manufacturer for guidelines.

Contraindicated Medications
- haloperidol (Haldol®)
- prochlorperazine (Compazine®)
- risperidone (Risperdal®)
- promethazine (Phenergan®)
- olanzapine (Zyprexa®)
- metoclopramide (Reglan®)
- aripiprazole (Abilify®)
- meperidine (Demerol®) — do not mix with selegiline or rasagiline
- ziprasidone (Geodon®)

Please notify my Parkinson’s Doctor that I have been admitted to the hospital

Prepared by Parkinson’s Disease Research, Education, and Clinical Center (PADRECC).
Adapted from: NPF Aware in Care Fact Sheet, Parkinson’s Resources of Oregon and OHSU Parkinson Center “Critical Information for Caring for the PD Patient”, and Parkinson Report (Summer 2007) “Five Frequently Asked Questions about Hospitalization”.

9/2013
For more information, go to www.parkinsons.va.gov
**Name:** ____________________  
**Last 4 SSN:** ___________  
**DOB:** ___________

**Family Contact:** ____________________  
**Phone #:** ____________________

**Neurologist:** ____________________  
**Phone #:** ____________________

### Common Symptoms of PD
I may personally have those symptoms which have been checked below:

<table>
<thead>
<tr>
<th>Motor</th>
<th>Non-Motor</th>
</tr>
</thead>
<tbody>
<tr>
<td>__Tremor at rest</td>
<td>__Depression</td>
</tr>
<tr>
<td>__Rigidity</td>
<td>__Anxiety</td>
</tr>
<tr>
<td>__Slowness of movement</td>
<td>__Cognitive decline/dementia</td>
</tr>
<tr>
<td>__Balance problems/falls</td>
<td>__Impulse control disorders</td>
</tr>
<tr>
<td>__Freezing (stuck in place)</td>
<td>__Orthostatic hypotension</td>
</tr>
<tr>
<td>__Lack of facial expression</td>
<td>__Pain</td>
</tr>
<tr>
<td>__Stooped posture</td>
<td>__Hallucinations and/or psychosis</td>
</tr>
<tr>
<td>__Swallowing problems</td>
<td>__Sleeping problems</td>
</tr>
<tr>
<td>__Drooling</td>
<td>__Constipation</td>
</tr>
<tr>
<td>__Low voice volume/slurred speech</td>
<td>__Urinary dysfunction</td>
</tr>
<tr>
<td>__Dyskinesias (extra involuntary movements)</td>
<td>__Other: ________________________________</td>
</tr>
<tr>
<td>__Other: ________________________________</td>
<td></td>
</tr>
</tbody>
</table>

### Typical Medications for PD
I take the medications circled below (see my Medication List for dosages):

- **Levodopa** – Carbidopa/levodopa (Sinemet® or Sinemet CR®), Carbidopa/levodopa oral disintegrating (Parcopa®), Carbidopa/levodopa/entacapone (Stalevo®)
- **Dopamine Agonist** – ropinirole (Requip®), pramipexole (Mirapex®), rotigotine (Neupro®), apomorphine (Apokyn®)
- **MAO-B Inhibitors** – rasagiline (Azilect®), selegiline (Eldepryl®), zydis selegiline HCl oral disintegrating (Zelapar®)
- **Anti-cholinergics** – trihexyphenidyl (formerly Artane®), benztrpine (Cogentin®), ethopropazine (Parsitan®)
- **COM-T Inhibitors** – entacapone (Comtan®), tolcapone (Tasmar®), Carbidopa/levodopa/entacapone (Stalevo®)
- **Other** – Amantadine (Symmetrel®)