

Medication form

Complete this form in the event you require a hospital admission. Fill out a new form when your medication schedule changes and keep an updated version in your hospital kit.

Name:

Date form completed:

Important names and numbers:

Partner/Carer	Relationship	Phone
Parkinson's Neurologist		Phone
GP		Phone
Pharmacy		Phone

Basic information:

I was diagnosed with Parkinson's: _____ (year).

Medication list:

List all medications you are taking for Parkinson's and other conditions, include supplements, OTC medications

Medication	Dosage	Frequency/timing	Condition	Date commenced

NB Maxolon / Stemetil / Haloperidol may worsen Parkinson's symptoms and should be avoided.

Device Assisted Therapies

Duodopa infusion: ____ - ____ hrs
 Morning dose: ____ mls
 Continuous rate: ____ mls/hr
 Extra dose: ____ mls
 No. of cassettes /day: ____
 Check Stoma/PEG site: ____

Apomorphine infusion: ____ - ____ hrs

Product: Apomine or Movapo
 Flow rate: ____ mls/hr (____ mg/hr)
 Bolus: ____ mls (____ mg) max no. per day
 Skin check: ____

Deep brain stimulation (DBS) device:

- Battery or rechargeable device
- Take with you to hospital details of your DBS, including neurologist, manufacturer, device
- instructions
- Always check with your DBS team before having an MRI to ensure the procedure is safe for you
- EEG and ECG Warning: Turn off DBS device before conducting ECG or EEG
- For surgery, Diathermy precautions apply

If you have any questions, check with the prescribing clinicians, call the manufacturer (Medtronic: 1800 510 6735; Abbott: 1800 727 7846; Boston Scientific: 1833 327 8324).

Fight Parkinson's is a leading source of specialised health information and advice services. Through research, education and support, we strive to improve the lives of people living with Parkinson's, PSP, MSA and CBS.

Any medical information provided is for general information purposes only. You should always talk to your treating doctor and qualified healthcare providers for personal medical and health-related instructions.

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