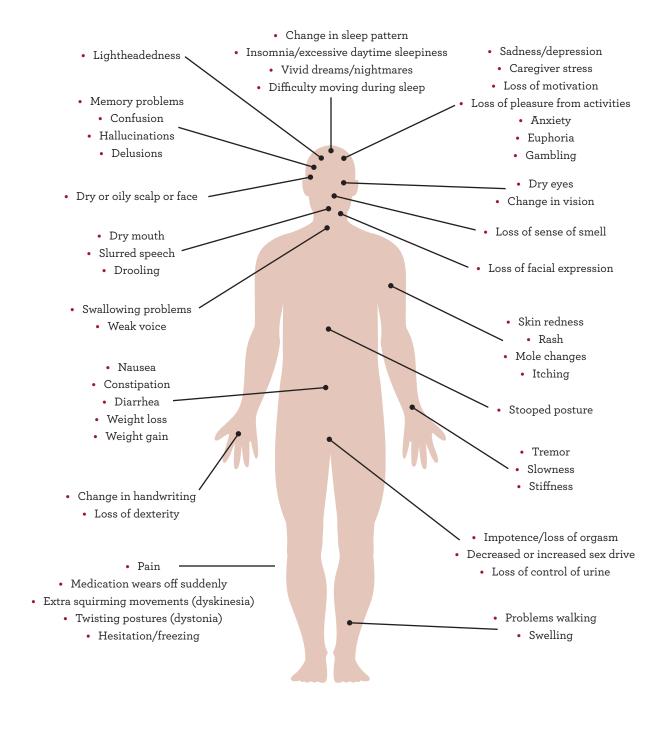
MY SYMPTOMS WORKSHEET

Use this body map to circle symptoms or problem areas that you would like to discuss with your doctor or other member of your wellness team. While most of these are symptoms of Parkinson's itself, some are side effects of Parkinson's medications. On the next page, indicate how bothersome each symptom is for you.

Bring the worksheet to discuss with your doctor at your next appointment.



Rate how each symptom or area of daily life bothers you by circling a number on a scale from 0 to 5.

o = No Problem or No Concern 5 = Severe Problem or Biggest Concern Anxiety Bathing, Dressing Bladder Problems Chest Pain or Palpitations Chills Constipation Cough or Sore Throat Delusions Depression Double or Blurred Vision Dyskinesia Falls Fatigue Fine Motor Movement, like folding clothes or opening mail Freezing Hallucinations Headache Hearing Loss Heartburn or Upset Stomach Impulsivity

Impulsivity	O	1	4	3	4	5
Joint Pain	0	1	2	3	4	5
Leg Swelling	0	1	2	3	4	5
Lightheadedness	0	1	2	3	4	5
Motivation	0	1	2	3	4	5
Muscle Spasm	0	1	2	3	4	5
Nausea/Vomiting	0	1	2	3	4	5



o = No Problem or No Concern

5 = Severe Pro	oblem or	Biggest	Concern
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"Off" Time	0	1	2	3	4	5
Pain	0	1	2	3	4	5
Rash or Bruising	0	1	2	3	4	5
Rigidity	0	1	2	3	4	5
Seizures	0	1	2	3	4	5
Sexual Function	0	1	2	3	4	5
Sleep	0	1	2	3	4	5
Slowness of Movement	0	1	2	3	4	5
Speech	0	1	2	3	4	5
Swallowing	0	1	2	3	4	5
Sweating	0	1	2	3	4	5
Thinking	0	1	2	3	4	5
Tremor	0	1	2	3	4	5
Walking	0	1	2	3	4	5
Writing	0	1	2	3	4	5

BLADDER WORKSHEET

Bladder problems can occur as a result of how Parkinson's affects the nerves that control emptying the bladder. This can lead to an overactive bladder in people living with Parkinson's, and/or incontinence, the accidental or involuntary loss of control of urine or bowel movements. This can range from occasional minor leakage to complete loss of control of urine or bowel movements. Review this worksheet for ideas of changes you can make to improve bladder problems, checking those you can implement right now.

Die	tary Changes
	Drink fluids for general health, but limit after 5:00 p.m. if you urinate frequently at night
Life	estyle Changes
	Wear pads to reduce stress, anxiety and increase your freedom to go out.
	Be safe. Talk with an occupational therapist about safety measures to take at home, such as grab bars in the bathroom, night lights to illuminate your path at night, a bedside commode or urinals when appropriate.
Tre	atments
	See your doctor about abrupt changes in bladder control, since this could signal a bladder infection. Also, an abrupt decline in movement or thinking functions can be the first sign of a bladder infection.
	Physical therapy can help with pelvic floor exercises to improve incontinence.
	Occupational therapy can help with bladder therapy, bathroom and hygiene, as well as offer many safety techniques to reduce falls.
	Review bladder control with your doctor. Certain medical conditions affect bladder control. Some medications cause muscle weakness and can therefore weaken bladder control.
	A urologist can help if incontinence continues despite treatment.
	Be sure to tell your doctor if you have memory or thinking problems, as certain bladder control medications can worsen memory.

COGNITIVE WELLNESS WORKSHEET

Thinking and processing can be improved in many enjoyable ways. Brain games, physical activity and social engagement all boost your brain health, which leads to increased cognitive wellness. Visit your community center, senior center or local community college to see what programs are available to you and your family. Many libraries, universities, school districts and online outlets also offer adult learning programs covering a wide range of interests. You can also ask your healthcare provider for a referral to an occupational, recreational, art, music or physical therapist for more focused cognitive wellness programs.

Make the commitment to schedule activities that challenge your brain into your routine. Choose things and people you enjoy, pace yourself and remember to have fun.

Inc	rease Physical Activity
	Consult with a physical therapist to develop the best, safest exercise program for you.
	Exercise three to five times a week. Personal trainers can motivate and help you stick to your routine.
	Don't exercise alone: involve your family or a buddy, walk in the park, go to a group exercise class. Getting to know others in exercise classes can provide a sense of connection and accountability to go.
	Yoga and tai chi give extra benefits of relaxation and improve balance.
	Dance and music add fun, joy and allow creative expression.
Fle	x Your "Thinking Muscles"
	Read or listen to documentaries, and/or books on tape.
	Do brain teasers, such as video games, word games, sudoku or puzzles.
	Play cards. Bridge, poker, euchre or solitaire are some examples.
Eng	gage Socially and Creatively
	Attend support groups.
	Take an art, music, drama, crafting or dancing class.
	Attend a poetry or book group.
	Join or organize your own coffee hour, dinner group or movie night.

CONSTIPATION WORKSHEET

Digestive health and specific problems, like constipation, can be improved through dietary and lifestyle changes. Check the items listed on this worksheet to indicate actions you can take to improve your constipation. Discuss any problems that may persist with your doctor.

Die	tary Changes
	Drink at least eight cups of fluid per day.
	Be sure you are eating 20–30 grams of fiber per day. Good examples are prunes, pears, nuts, grains, ground flaxseed and bran.
	Eat a well-balanced diet with plenty of fruits, vegetables, multigrain breads and cereals. Eat smaller meals several times per day, rather than three large meals.
	Avoid high-sugar foods and snacks.
	Choose high-fiber bread (>5 grams fiber) instead of refined white or wheat bread.
	Try homeopathic herbal teas blended to help relieve constipation.
	Try drinking a caffeinated warm beverages with earlier meals, but avoid carbonated beverages if bloating is a problem.
Life	estyle Changes
	Exercise! At least take a walk daily, if possible. A physical therapist can help you get started with an exercise routine that's right for you.
	Try to maintain good posture while doing cardio or strengthening exercises.
	dication Recommendations te: talk to your doctor before beginning)
	Stool softeners once or twice a day can help. You can also try a stool softener with a stimulant if you experience moderate to severe constipation.
	Glycolax powder (like RestoraLax) can be purchased over the counter and is very effective, has few side effects and can be used daily if needed.
	Consider taking once-a-day supplements, such as fish oil, flaxseed oil or magnesium.
	Avoid excessive use of fiber supplements such as Metamucil or Citrucel as they can sometimes worsen constipation and lead to obstruction.



Other Treatment
Ask your doctor about medications you may be taking that can worsen constipation, such as amantadine, amitriptyline and sedatives.
\square Consider seeing a gastroenterologist, a specialist who treats constipation.
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
Ask your doctor for a nutrition consult if you need more help with dietary changes.

W DENTAL WORKSHEET

Dental care is an integral part of living well with Parkinson's. Regular dental care can minimize your risk of experiencing pain and discomfort, but most importantly, it can reduce the risk of infection, which can be a significant stressor on the body when coupled with Parkinson's-related challenges.

Die	tary Changes
	Choose a nutritious snack between meals like cheese, milk, plain yogurt, fruits, vegetables or nuts. Sugary snacks (like candy), soda and sticky food (like dried fruits) can put you at risk for cavities and other oral health problems.
	Citrus fruits and other acidic foods (like oranges, tomatoes and red meat) should be eaten as $part$ of a meal instead of separately, since the acidity of these foods can have a negative effect on tooth enamel.
	Talk with your primary care physician about including cheese, milk, calcium-fortified tofu, leafy greens, almonds, meat, poultry, fish and eggs in meals. These have high calcium, nutrient and phosphorus levels and may assist in dental health but prevent medication absorption.
	Drink your daily intake of fluids to avoid dehydration and dry mouth.
Life	estyle Changes
	Schedule tooth brushing around medication "on" times.
	Replace your toothbrush or toothbrush bristles every 3–4 months, after you've been sick or when it starts to show signs of wear such as frayed bristles.
	Brush your teeth three times a day or after each meal for two minutes to remove sugars and food particles from your teeth.
	Floss daily. Instruments like a flossing proxy brush can help ease the process, or a care partner can assist.
	Use moisturizing mouth spray, non-alcohol based mouthwash, a fluoride rinse or oral swab brushes daily if you experience dry mouth or inflammation (common Parkinson's medication side effects).
	Use a wide handle toothbrush or add an adaptive device to facilitate easier grip on the toothbrush handle.
	Consider an electric, ultrasonic or specialty toothbrush to maximize brushing benefits.

	Ask your dentist about using a biteguard if you have bruxism (grinding of teeth).
	Ask your dentist about prescription strength, topical stannous fluoride gel treatments and toothpastes, as these can be good preventative strategies.
Tre	atments
	Visit your dentist every 6 months for regular, short (45 minutes or less) check-ups.
	Complete the "Daily Medication Log" in this section, and bring it to your dental visit to address important risks of medication interactions during your dental appointment. Anesthesia and novocaine can cause increased sedation, imbalance or confusion.
	Schedule your appointments during your medications "on" time and when your dyskinesia is not generally bothersome.
	Ask to keep the dentist chair 45° incline or higher to enable comfortable swallowing.
	Request frequent suctioning to assist with saliva production and muscle weakness.
	Have your dentist or care partner assist you in and out of the dental chair to reduce the risk of a fall.
	Include your dentist in your wellness team, making sure they have an understanding of how Parkinson's disease may affect your oral health.
	Collaborate with your dentist to determine a signal for discomfort; for example, put your hand up to signal you need a break or are having trouble swallowing.

DYSKINESIA AND "OFF" TIME LOG

Name:	Date:
ij	1. In the Medications row, place an X under the hour that you took your medicine; draw a line though the hours that you are asleep.
જં	2. In the Dyskinesia row, indicate the severity by entering the correct number. Use the guide below to determine which number is appropriate.
	O = No extra movement

In the "Off" row, indicate if you felt that your medicine is not working using the following guide. က်

o = Feeling no symptoms

3 = Severe disabling movement

1 = Mild extra movement 2 = Moderate movement 1 = Mild tremor, stiffness or slowness without disability

2 = Moderate tremor, stiffness or slowness, possibly requiring assistance

3 = Severe tremor, stiffness or slowness requiring total assistance

			аш								E								аш			
TIME	2 9	00	6	10	11	12	-	2	m	L()	9	7	00	6	10	11	12	-	2	က	4	D.
1. Medications (Place an X at the time of your dose)																						
2. Dyskinesia (See scale above)																						
3. "Off"																						

Keep this diary 3 days before your appointment and bring it with you.

(See scale above)

EMOTIONAL WELLNESS: ANXIETY

Ide	ntify Triggers		
	Keep a diary to identi	fy triggers that worsen anxiet	ty.
	Some triggers I've id	entified are:	
	Record times when ar medications wear "off	xiety is worse. For instance, a	anxiety can increase when
	I've noticed my anxie	ty is worse when:	
Ado	dress Your Anxiety		
	•	about treatment that can incless and coping strategies.	lude medicine, relaxation techniques,
	Learn to breathe. Simble calming.	ple exercises consisting of 10-	–20 slow, steady deep breaths can
Red	luce Stimulants		
Avc	oid nicotine, diet or ene	ergy pills and caffeine.	
Sub	estance	Current Use	Goal for Reducing
Nic	otine	x week	x week
Ene	ergy pills/drinks	x week	x week
Die	t pills	x week	x week
Caf	feine	x week	x week
Imp	olement Relaxation Te	chniques	
	community, recreation		ack, meditation or prayer. Many ditation or yoga classes. There are ore about these techniques.
		•	ent to take a breathe deeply, slowly ty attack (or to calm one in progress).
		e at home for relaxation. Try	or yoga videos to help you relax. using aromatherapy, soft lighting and



Cha	Change Your Habits		
	Avoid taking on too many tasks or always saying "yes." Maintain a routine, and prioritize chores and commitments by making lists. An occupational therapist can help with this.		
	Exercise to help relieve tension. Gentle stretching helps relax the face, shoulders and back. Try yoga or tai chi.		
	Talk about your feelings of stress or anxiety with loved ones. Consider sharing your observations about what triggers these feelings, and talk about how they can support your efforts to reduce stress and anxiety in your life.		
	Take a moment for yourself. Try a soothing cup of tea; chamomile, lemon balm or valerian root may have anxiety-fighting benefits for some people.		

EMOTIONAL WELLNESS: DEPRESSION

lde	ntify Triggers		
	Keep a diary to identify triggers or thoughts that worsen your mood. Record times when depression is worse. For instance, depression can worsen when medications wear "off."		
	Some triggers I've identified are:		
Ado	dress Depression		
	Talk with your doctor about treatment. This can include medicine (such as antidepressants), counseling, cognitive behavioral therapy or relaxation techniques.		
	Obtain a general medical examination. Some medications, thyroid disease, heart disease and illness can cause or worsen depression.		
	Explore light therapy if you suffer from seasonal/winter depression.		
	If you are currently taking antidepressants, closely monitor with your doctor. Some studies have found that antidepressants may exacerbate other Parkinson's symptoms.		
Ado	d Positive Energy		
	Spend five minutes a day thinking about or visualizing life's pleasures or what you are grateful for, such as family, grandchildren, pets.		
	Spend time to reflect on the beauty of the natural world around you.		
	Volunteer. It can be uplifting and rewarding.		
	Laugh with others. Watch comedies. Children and pets bring a smile.		
	Dance, paint, sing, share memories with others around you.		
Cha	ange Your Habits		
	Eat a well-balanced diet. Consult the "Nutrition Self-Assessment" in this section for more ideas of how to improve your diet.		
	Take medications as prescribed.		
	Tend to sleep habits. Consult both the "Fatigue Worksheet" and the "Insomnia and Sleep Worksheet" in this section for tips to improve your sleep hygiene.		

EVERY VICTORY COUNTS

Be Connected		
Attend classes, support groups, call a friend, join a positive chat group or a buddy program.		
Attend to your spiritual needs.		

FATIGUE WORKSHEET

Complete this worksheet to determine if certain times of day or activities trigger your fatigue. Record observations you have about when you feel fatigued and what other things are happening when you do, and check the actions you can take right now to improve your energy.

I fe	el fatigued most often:
	Early morning
	Late morning
	Early afternoon
	Late afternoon
	Evening
	My mood or emotional state seems to make me feel more fatigued.
Ho	w often does this occur?
	ner situations I've noticed make me feel fatigued:estyle Changes
	Exercise to improve strength and endurance. This improves mood and reduces the energy required to do daily activities.
	Exercise when you feel good, such as when the effects of your medications are at their best. Pace yourself, though. Don't overdo it.
	Pay attention to your sleep habits. Use short naps (between 10 and 20 minutes) during the day, if needed. However, limit naps. Sleeping excessively during the day can actually increase your cleanings and fatigue as well as make it more difficult to clean at night.
	increase your sleepiness and fatigue, as well as make it more difficult to sleep at night.
	Avoid post-lunch fatigue by keeping your mind active with games, puzzles or hobbies o taking a walk outside.

Die	Dietary Changes		
	Eat small, frequent meals instead of big, heavy meals. Don't skip breakfast. Be sure to get plenty of fluids.		
	Snack on high-energy foods such as apples, oranges, pears, yogurt, walnuts, almonds, oats and whole-grain products. Avoid processed, high-sugar foods which can rob you of your energy.		
	Caffeine can be helpful for midday fatigue or sleepiness if permitted by your doctor. Avoid caffeine after 3:00 p.m.		
	See general dietary guidelines in the "Nutrition Self-Assessment" and in the "Diet and Nutrition" chapter in the Living Well Now section.		
Tre	atment		
	Take Parkinson's medications on time to avoid wearing "off."		
	Avoid energy pills!		
	See you doctor for a checkup. Anemia, malnutrition, sleep apnea, depression, thyroid and vitamin deficiencies can cause fatigue. Review your medications (prescription and overthe-counter) as some can cause fatigue and worsen daytime sleepiness.		
	See an occupational therapist for energy conservation techniques and physical therapist or personal trainer for exercise guidance.		
	Refer to the Living Well Now section for helpful tips on sleep, anxiety and depression. These are all problems that can reduce your energy levels.		

☑ GAIT, BALANCE AND FREEZING WORKSHEET

Many of the main motor symptoms of Parkinson's—tremor, rigidity, stiffness and postural instability—can cause difficulties with walking and balance. Freezing, problems initiating movements that often results in feeling like your feet are glued to the floor, is especially common in the later stages of Parkinson's. This worksheet provides ideas to help improve gait and balance and to manage freezing. Check the options you can begin to implement right now and be sure to discuss any continuing challenges with your doctor and wellness team.

Phy	Physical Exercise and Training		
	Perform balance exercises every day, even before you think you need them. Consider it part of your routine, like brushing your teeth. Balance is critical for walking. You can always improve your balance, even if it seems perfect right now! For more specific balance exercises, see the "Balancing Life, Exercise and Function for Optimal Health" article in the "Complementary Therapies" chapter of the Living Well Now section.		
	Exercise daily. Include stretching, strengthening and exercises to help you get out of a chair, stand straighter and walk farther.		
	See a physical therapist who specializes in movement disorders to develop a home exercise program, even if you have one. Ask your PT when you should be re-evaluated. Do not wait for your doctor to initiate it – you can ask for it. See the "Why Exercise Matters" chapter in the Living Well Now section for more details about at-home exercises to improve gait, balance and freezing.		
	Practice making wide U-turns rather than pivot turns to avoid falling.		
	Use a walking aid if you need help walking. It will help you walk better, keep you safe and remain independent longer. Be sure you see your physical therapist to choose the correct cane or walker. Using the wrong one can actually cause falls!		
Life	Lifestyle and Good Habits		
	Get in the habit of daily exercise. Five minutes of exercise daily is better than 20 minutes once a week.		
	Establish a routine. Write your goals and expectations on a calendar.		

are working.

Try to time your exercise to the time of day you feel best, such as when your medications

		Exercise with a buddy. Everyone in your family can benefit. Consider a "balance night" devoted to balance games. You do not need fancy video games for this. Make up your own challenges. Keep safety first, though. It is a good idea to involve your physical therapist before beginning.
		Avoid multitasking. Do one thing at a time. Avoid carrying multiple objects in both hands if you have trouble walking. This helps you focus on the task of walking if you have trouble.
	Die	tary Changes
		Dizziness and low blood pressure can cause weakness, fatigue, loss of consciousness and falls. See the "Low Blood Pressure and Dizziness Worksheet" as well as the and "Nutrition Self-Assessment" for additional treatment recommendations.
		Eat the high-energy foods explained in the "Diet and Nutrition" chapter in the Living Well Now section, rather than processed, high-sugar foods that rob you of your energy.
Treatment		
		There is a tendency to blame difficulties solely on Parkinson's, but there are many causes of walking and balance problems. Fatigue, heart and lung conditions, muscle weakness, stroke, inner-ear problems, peripheral neuropathy, joint pain and arthritis are all examples of conditions that occur more often as we age. Talk with your doctor to be sure that these potential other problems are treated.
	Tip	s for Freezing
	mov	ezing (feet stuck to the floor) occurs in crowded, small places. Often, the act of initiating vement, such as when you stand and begin walking, make a turn or with any stop and start novement, prompts freezing.
		Learn to make wide "U-turns." Avoid pivoting. If you use a walker, be sure your walker is the right type for freezing.
		See your physical therapist to review cueing strategies. Cueing from lasers, guided imagery, marching or even walking to the beat of a musical rhythm can help get you over or through a freezing spell. For instance, sing the first few lines of a common song like "Happy Birthday" in your head to help get "unstuck."
		See your occupational therapist to review areas that cause you to freeze. Can crowded spaces be identified, such as bathrooms or closets? Can these areas be modified by removing clutter?

	Experiment with flooring and shoes. Shoes with soft rubber soles are comfortable, but may "stick" to the floor. Different flooring textures, color changes and patterns can precipitate freezing, such as changing from tile to carpet.
	Experiment with putting tape on the floor, a step distance apart. This can serve as a visual cue to help you lift your legs to walk over and through a tight space or threshold.

☑ INSOMNIA AND SLEEP WORKSHEET

Trouble falling asleep and staying asleep are very common in people living with Parkinson's. This worksheet provides a range of strategies for preparing your body for rest and for giving yourself the best possible sleep environment. Take a good look at your sleep routine using the list below. Note habits you'd like to change, and decide which recommendations you will incorporate into your routine in the future. Talk to your doctor about sleep concerns you may have, as well as strategies you've tried to improve your sleep.

010	
	Remove TV, computers, tablets, cellphones and other technology devices from your bedroom. Keep the room dark and use night lights that can easily be turned on, such as motion-activated lights that will turn on when you walk to the bathroom.
	Establish a routine: go to bed and get up the same time each evening and morning.
	Avoid intense TV shows, video games or anxiety-provoking activities before bed. This is not the time to pay your bills! Try relaxing music, gentle stretching, aromatherapy, meditation and massage before bed.
	Avoid bright lights and screens at night. Many computers, tablets, smartphones and other devices have "blue light reduction" options you can either activate or download to reduce the impact of the specific light of computer screens that can keep you awake.
Die	tary Changes
	Avoid stimulants such as caffeinated drinks after 3:00 p.m. Avoid alcohol completely or limit to one glass.
	Avoid heavy, starchy meals or snacks before bed. Try foods with tryptophan, such as poultry and milk.
Life	estyle Changes
	Take a warm bath to relax before bedtime.
	Limit catnaps during day to 10 to 20 minutes before 3:00 p.m.
	Avoid exercise at night, but do exercise daily.



Sleen Hygiene

Bed	Bed Comfort		
	Use silk or satin pajamas or sheets if you have trouble turning.		
	Consider a sturdy, secure headboard that you can use to help turn over in bed.		
	Examine your mattress. Has it seen better days?		
	An occupational therapist can also help with bed comfort.		
Tre	Treatment		
	See your doctor to optimize motor control and Parkinson's medication.		
	Depression, anxiety, pain, restless legs syndrome, vivid dreaming, incontinence and sleep apnea can be treated. Discuss with your doctor.		
	A sleep study may be needed to diagnose sleep apnea if you snore.		
	Sleep medications can cause daytime sleepiness, confusion and weakness. You may not need them if you develop good sleep habits.		

✓ LOW BLOOD PRESSURE AND DIZZINESSWORKSHEET

Dizziness or lightheadedness can occur as a direct symptom of Parkinson's or as a side effect of some Parkinson's medications. You can also experience lightheadedness if you do not drink enough fluids or restrict salt in your diet.

Parkinson's may lower your blood pressure, as can the medications used to treat the movement symptoms of Parkinson's. This worksheet provides helpful lifestyle changes you can make to address low blood pressure and dizziness. Check the changes you can make now, but be sure to discuss with your doctor to identify root causes and other potential solutions. For more information about how to address low blood pressure and dizziness, consult the "Neurogenic Orthostatic Hypotension (nOH) in Parkinson's" article in the What You Need to Know About Parkinson's section.

Dietary Changes

	Increase fluid intake to eight cups per day. Caffeine can help, but use in moderation. Sports drinks and salty drinks such as Gatorade or V8 are helpful, but may not be safe if you have diabetes, hypertension or heart disease. Check with your doctor before you make any changes.		
	Get in the habit of drinking a full cup of water every time you take a dose of your medication.		
	Avoid alcohol.		
	Add salt to your diet if approved by your doctor.		
	Eat small meals to avoid blood pressure drops that can occur after large meals.		
	Reduce your consumption of high-glycemic carbohydrates, like white breads, rice and pastas, sugary juices, cereals and sweets.		
	Increase your consumption of low-glycemic index carbohydrates, like whole-grain breads, rice and pasta, fruits and nuts.		
Life	Lifestyle Changes		
	Elevate the head of your bed by 30° by placing blocks under the legs of your bed or getting a mattress that can be easily adjusted. Simply adding more pillows may not help.		
	Stand slowly to give your blood pressure time to adjust to a change in position.		

EVERY VICTORY COUNTS

	Wear compression stockings to help keep fluid in your blood vessels and reduce leg swelling.
	Avoid holding your breath or contracting your stomach muscles excessively when standing.
Tre	atment
	Review your medications with your doctor. Many medications, including Parkinson's medications, can reduce your blood pressure.
	Physical therapy can show you exercises that can reduce drops in blood pressure when standing, such as contracting your leg muscles before you stand.
	Talk to your doctor about medications to increase blood pressure if other measures are not helpful.
	If you take medications for high blood pressure, speak to your doctor about whether you still need them.
	Treat constipation, since straining may cause dizziness.

SPEECH AND COMMUNICATION WORKSHEET

Many people living with Parkinson's experience difficulties speaking and communicating. These challenges may show up as a quiet voice, unclear speech, trouble finding words or reduced facial expression. Review the worksheet below for ideas you can use to improve your speech and communication. Check the tips you plan to put into practice.

spe	eaking tips			
	Pace your words if you talk too fast.			
	Begin talking by sitting up straight, taking a deep breath and opening your mouth.			
	Singing is fun and helps keep your voice flexible and increases your breath support. Try karaoke or simply sing along to your favorite songs.			
	Practice facial exercises like the sounds "ooh" and "ahh" with exaggeration in your mouth to reduce muscle stiffness.			
Bre	athing Tips			
	Open your chest by sitting up straight to allow for big, deep breaths. Breathing deeply helps increase your volume of speech.			
	Practice deep breathing daily. Yoga, tai chi and meditation classes can all help you learn breathing exercises.			
Communication Tips				
	Improve communication with your care partner. A speech therapist and counselor can help with ideas such as active listening and other recommendations focused on staying engaged in communication and relationships, even when common verbal or non-verbal cues may be different because of Parkinson's.			
	Get your hearing checked to ensure it is not impaired.			
	Don't let conversation bypass you. If you are in a group setting, ask the group to pause, reminding them that you or your partner would like to speak and be heard!			
	Use body language and hand gestures during a conversation to help tell your story, especially if your facial muscles do not express emotion like they used to.			



	Тис	Treatment		
•	ıre			
		Seek out a speech therapist early in the course of Parkinson's. A speech therapist with experience working with people living with Parkinson's can help keep your speech strong before there is a problem or work with you to improve speech with any change.		

SWALLOWING WORKSHEET

Parkinson's can present a variety of problems related to swallowing, ranging from minor complaints when swallowing pills to severe difficulty chewing tough foods like steak and hard breads. Swallowing issues are important to address because of the potential risk of aspiration pneumonia, caused when saliva, liquids or food is breathed into the lungs instead of being swallowed into the esophagus and stomach. Many swallowing issues can be easily addressed with specific swallowing exercises and minor changes in diet. It is a good idea to consult with a licensed speech language pathologist to identify problem areas and improve swallowing ability through intentional exercises. The worksheet below provides changes to help with swallowing challenges; check those you can incorporate into your daily routine now.

Swa	Swallowing Tips					
	Cut food into smaller pieces.					
	Take smaller bites when eating.					
	Avoid gulping, big sips when drinking.					
	Avoid straws if you have a swallowing problem, as using a straw may promote choking.					
	Alternate food with sips of fluid to help your swallowing tract remain clear. This is especially helpful if you have dry mouth.					
Lifestyle Changes						
	Don't eat when overly tired. Try to eat before you reach that point.					
	Eat at the table. This helps avoid distractions, allowing you to focus on eating.					
	Eat sitting straight. A chair at the table is better for posture than the couch or recliner.					
	Don't stop going to restaurants if this is enjoyable to you. Call ahead to discuss your concerns. Typically a chef can prepare your meal to meet your needs. You can ask for a specific table if you are self-conscious. Early-bird specials are not only cheaper, they're often less crowded and less noisy!					



Die	Dietary Tips			
	Avoid dry, flaky foods like cornbread, toast, rice or cake unless it is moist. Sauces and gravy help keep your food tasty and moist.			
	Switch to thicker liquids. Thin liquids and water are often more difficult to swallow. Mix pills in applesauce or yogurt if you have trouble swallowing.			
	Try eating papaya fruit or drinking papaya juice to thin your saliva if it feels too thick.			
	Drink adequate fluids, but give yourself more time to do so.			
	Whether you have too much saliva in your mouth or not enough, try sucking on small suckers, lemon candy or chewing gum. Although this creates more saliva, it will prompt you to swallow more frequently.			
	Ask for a swallowing evaluation if you are coughing, drooling, feeling like you have trouble clearing your throat or swallowing pills, are changing your diet due to swallowing concerns or are losing weight.			
	Always report changes in swallowing to your doctor.			

SEXUAL DYSFUNCTION WORKSHEET

Many people with Parkinson's experience changes in their sexual activity, including low libido, increased sex drive and even hypersexuality, difficulty achieving orgasm or pain during intercourse. Sexual changes and dysfunction can be caused by Parkinson's or side effects of certain Parkinson's medications. This worksheet will provide questions you can ask different members of your wellness team to start a conversation about improving sexual dysfunction as well as adjustments that may help improve your intimacy.

Ask	Ask Your Primary Care Physician:				
	Are there diagnostic tests appropriate for sexual dysfunction?				
	Do I need a referral to a gynecologist or urologist?				
	Are my other medications impacting my sexual life? If so, are there treatments for this?				
Ask	Your Parkinson's Doctor:				
	Are any of my Parkinson's or Parkinson's-related medications contributing to sexual dysfunction or hypersexuality/impulsivity problems?				
	Discuss anxiety, depression, insomnia, restless legs, bladder problems, constipation, fatigue, personality changes or movement-related problems that are impacting your relationship. Medications and physical therapy may be helpful to treat symptoms and maximize strength and flexibility.				
	Ask for a referral to a trained counselor or neuropsychologist.				
	Ask for a referral to a speech therapist if challenges communicating verbally are affecting your relationship.				
Other Tips:					
	Take your medications on time to feel your best.				
	Exercise to build up stamina, reduce fatigue and stress.				
	Eat a balanced diet to maximize your health — body, mind and brain.				
	Drink appropriate amounts of fluids to reduce fatigue and maintain your blood pressure.				
	Reserve together time for you and your partner to focus on emotional and physical closeness.				
	Be as independent as possible. Set guidelines when you want help.				

	Show gratitude to your care partner, even the smallest of actions can make a huge impact.
	Set aside time each week to focus on your relationship.