

The tips provided here will help you get the most out of your visit, assist in fostering a good doctor-patient relationship and improve communications.

- ♦ Bring your spouse, partner or close friend with you to an appointment as they can help bring another perspective to the issue, and they can help you record/remember things that were discussed.
- ♦ Bring all PD **ACT on Time**® kit tools that will facilitate the visit, such as the **My PD Navigator**.
- ♦ Go to your appointment with a written list of questions you need answered. Don't wait for the doctor to ask you.
- ♦ Plan your communications and prioritize your concerns. Make sure to cover everything during the appointment.
- ♦ Appointments with specialists can take months. **Be proactive.** If you are experiencing problems between appointments, bring this to the attention of your family physician (GP) and they may be able to communicate it to the specialist and receive answers they can relay to you.
- ♦ Ask for options and consider other treatments. If you are experiencing problems with a treatment, let your doctor know.
- ♦ Report all your symptoms, responses to medications and changes no matter how insignificant you may think they are. Record when the change or symptom began; when it occurs; how long it lasts; if it is consistent or intermittent. Keep your **PD Summary** updated. Tell your story with confidence. You are the expert on you!
- ♦ Inform the doctor of any supplements you are taking or complementary therapies you may be engaging in. These need to be considered in the context of your complete care plan.

- ♦ Understand any plans before you leave the doctor's office. Take notes and don't be afraid to ask for clarification.
- ♦ If for some reason you won't or can't seem to follow your doctor's advice or recommendations, let your doctor know. They may have options that make compliance easier.
- ♦ Remember: Being politely persistent is not the same as being pushy! Be firm, be clear, write things down and follow-up. You and your family must be your own advocates. You deserve it!

Tips for Good Communication

Who? Reach out to the person we can actually assist you. Is this a situation better handled by the emergency department or Parkinson Canada?

Where? Let people know where and when you can be reached, at all times.

Why? When you're calling your doctor, specialist or other health care provider, be clear in your purpose and expectations.

What? Make a list of your most pressing issues to discuss with your health care provider.

When? Call at convenient times. If you have to change or cancel an appointment, be sure to contact the provider at least a few hours prior to the appointment, if at all possible.

How? Timely emails can be more effective than phone calls. They provide great records of shared information.

Parkinson's Disease Summary

Complete this form prior to your next neurologist's visit. Do it with a care partner and/or family member so their observations can be captured. This form will assist the neurologist in optimizing your medication dosing and schedule and will help assess whether or not you may benefit from seeing other members of the health care team.

Please check all that apply NOW, especially those having a major impact on your quality of life. Keep in mind that not all will apply at this time. Keep blank copies of this form for future use.

Name: _____

Date: _____

Years w/ Parkinson's Disease: _____

My Medications

I take my medications on time, every time. Y N

- I experience:**
- Wearing off of my medications
 - Disability upon wearing off of my medications:
 - Mild
 - Moderate
 - Severe
 - Uncontrolled movements (Dyskinesia)
 - Muscle contractions (Dystonia)
 - Pain:
 - Mild
 - Moderate
 - Severe

My Diet & Appetite

My diet/appetite is:

- Unchanged
- Increasing
- Decreasing
- Worsening my Parkinson's symptoms
- Increasing my weight
- Decreasing my weight

My diet/appetite has been impacted by:

- Stress
- Difficulty swallowing
- Inability or changes in tasting food
- Nausea
- Vomiting
- Bloating

My Lifestyle

I live at home:

- Independently
- With family and/or friends
- With homecare assistance

I need: More help at home- Relief for my caregiver/care partner

I currently: Drive a car- Exercise at least 20 min/day

In the past months, my activity level has:

- Remained the same
- Changed and created some limitations
- Changed such that I stay in bed/chair more
- Changed, I'm in bed/chair less than half day
- Changed, I'm in bed/chair more than half day
- Changed, I'm mostly bedridden

My Motor Symptoms

I am experiencing problems or issues with:

- Tremors: When? _____ Where? _____
- Stiffness
- Slowed movements
- Freezing
- Falling
- Balance
- Speaking
- Swallowing
- Drooling
- Smiling and/or Blinking

My Non-Motor Symptoms

I am experiencing problems or issues with:

- Mood and/or motivation:**
 - Anxiety
 - Depression
 - Mood swings and/or lack of motivation
 - Decreased desire to socialize
- Physical sensations:**
 - Numbness and/or tingling
 - Inability to smell properly or at all
 - Inability to taste properly or at all
 - Lightheadedness and/or dizziness upon standing
 - Vision:** Blurred
 - Changes in ability
- Impulse-control:** Eating
- Gambling
- Shopping and/or spending
- Other: _____
- Sex:** Increased desire
- Decreased desire
- Sleep:** Increased
- Decreased
- Thoughts and/or information processing:**
 - Confusion
 - Planning & formation
 - Memory
 - Seeing things aren't there
- Bowel and Bladder Function:**
 - Bowel movements:**
 - Constipation # _____ x # _____ days
 - Diarrhea # _____ x # _____ days
 - Urination:** Incontinence
 - Burning sensation