Important Information	This Card Belongs to	In Case of Emergency	ACT » on time
➤ I must get my medications on time – every time	Name:	Name:	Medical
<ul><li>If not, I may have problems with my:</li><li>Speech</li><li>Movement</li></ul>	Address:	Address:	Alert
<ul> <li>Cognition • Behaviour and</li> <li>It could take me hours, days, or weeks to recover</li> </ul>			I have Parkinson's Disease and need my medications on time.
> I take the medications listed on the inside of this card, at the time intervals indicated (see contraindicated medications on other side of card)	Home Phone:	Home Phone:	Please do not assume I am rude, uncooperative, cognitively impaired or intoxicated.
	Cell Phone:	Cell Phone:	
Do not give me any new medications without first consulting with a specialist	Work Phone:	Work Phone:	77 Parkinson Canada 1.800.565.3000

Time(s)	Medication(s)	Dosage(s)	Drug Category	Recommendations
			ANTIPSYCHOTICS	Use the following instead:  • Seroquel (quetiapine)  • Clozaril (clozapine)
			NARCOTIC ANALGESICS	If <b>Azilect</b> (rasagiline) or <b>Selegine</b> are being taken, <b>AVOID</b> :  Demerol (meperidine)
			ANESTHESIA	If the meds listed in box above are being taken, AVOID: Demerol (meperidine) Ultram (tramadol) Inapsine (droperidol) Methadose (methadone) Halothane Cyclobenzaprine
			NAUSEA / GI MEDS	AVOID the following:
			ANTIDEPRESSANT	AVOID: Abilify (aripiprazole)