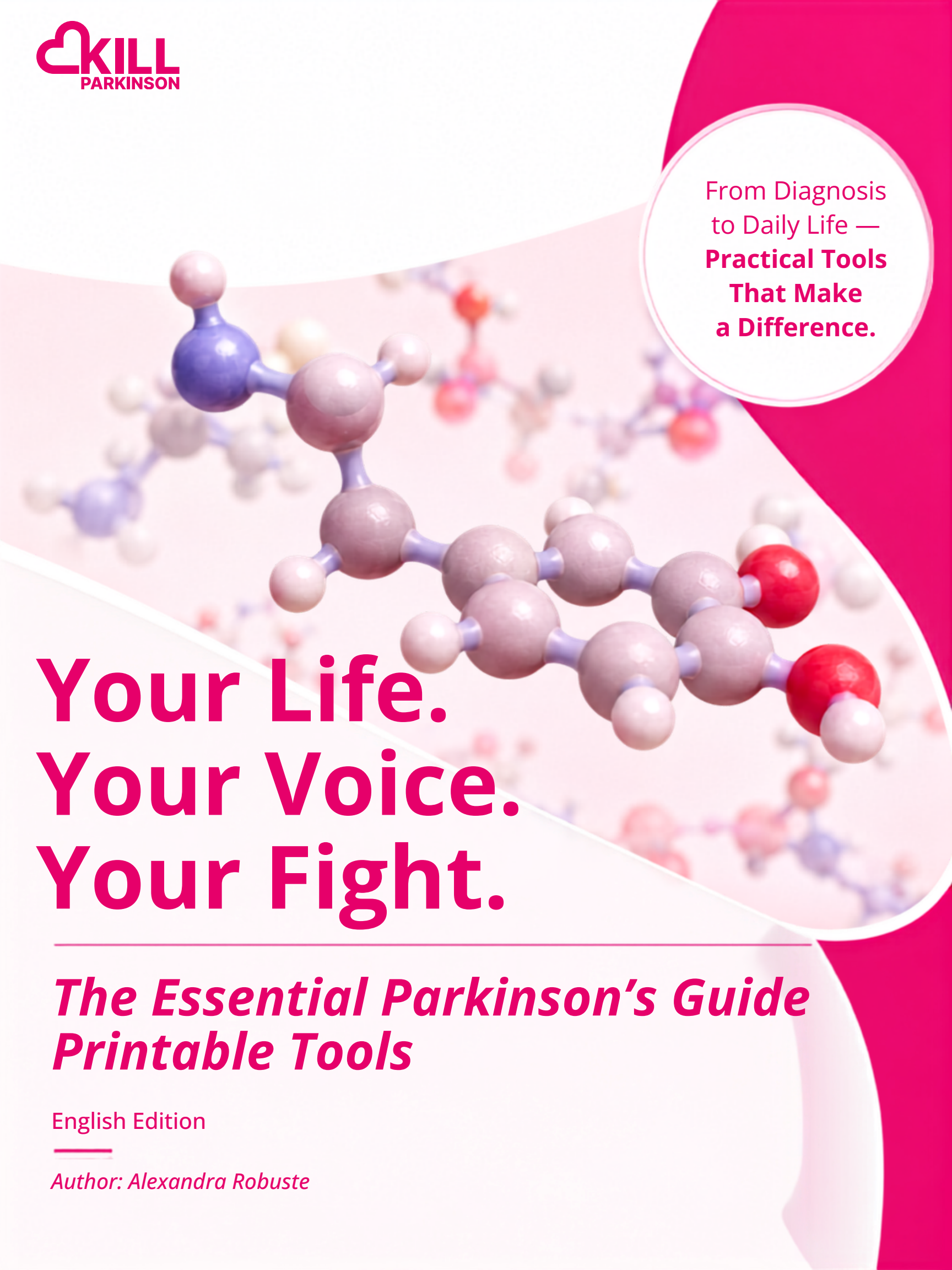


From Diagnosis
to Daily Life —
**Practical Tools
That Make
a Difference.**

A background image of a molecular structure, possibly a protein or a complex organic molecule, rendered in a 3D ball-and-stick model. The atoms are colored in shades of purple, blue, red, and white, and are connected by bonds. The structure is set against a light pink background with a white diagonal line.

Your Life. Your Voice. Your Fight.

The Essential Parkinson's Guide Printable Tools

English Edition

Author: Alexandra Robuste

Welcome to Your Essential PD Toolkit

Living with Parkinson's means keeping track of a lot — symptoms, medications, appointments, sleep, mood, energy, food. It's a lot to hold in your head. This toolkit is here to help.

These pages are yours. Print them, fill them in digitally, use one tracker or all of them — however they fit into your life. There is no right or wrong way. The goal is simply to make your days a little clearer, your appointments a little more productive, and your patterns a little easier to see.

Every tool in this kit was designed with real daily life in mind — not clinical perfection, but the kind of honest, practical tracking that actually helps you and your care team understand what's going on.

Use them today. Use them next month. Come back whenever you need a fresh page. You are not managing this alone. We are behind you — every step of the way.

Imprint

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⚠ Medical Disclaimer — Please Read Before You Begin

This guide/ trackers do not provide medical advice.

The information contained in this publication is intended for general informational and educational purposes only. It is not a substitute for professional medical advice, diagnosis, or treatment of any kind.

Never disregard professional medical advice or delay seeking it because of something you have read in this guide. Always consult your neurologist, physician, or a qualified healthcare provider before making any changes to your medication, therapy, diet, exercise routine, or any other aspect of your health management.

Parkinson's disease is a complex, individual condition. What works for one person may not work for another — and may even be harmful.

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Liability

Kill Parkinson gemeinnützige UG publishes this guide as part of its non-profit awareness mission. The purpose of this publication is to raise awareness about Parkinson's disease and make information more accessible to patients, caregivers, families, and the wider community. By making this information publicly available, we aim to support informed discussions with qualified healthcare professionals and promote greater understanding of the condition. This publication is intended solely for informational purposes and should not be interpreted as medical advice.

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First English Edition, 2026.*

Author

Alexandra Robuste

Scientific Review

Melinda Barkhuizen, PhD

PERSONAL INFORMATION

For Medical & Emergency Use

PERSONAL DETAILS

Full Name: _____

Date of Birth: _____

Address: _____

Phone: _____

Email: _____

Preferred Language: _____

MEDICAL ALERT

Diagnosis: _____

Year Diagnosed: _____

Medication timing is:

☐ Flexible ☐ CRITICAL — must be on time

Allergies: _____

Medications: _____

Other (food, etc.): _____

EMERGENCY CONTACTS

Primary Contact

Name: _____

Relationship: _____

Phone: _____

Secondary Contact

Name: _____

Relationship: _____

Phone: _____

Additional Contact (optional)

Name: _____

Relationship: _____

Phone: _____

MEDICATION SUMMARY

MEDICATION	DOSE	TIME(S) TAKEN

IMPORTANT NOTE

Do not delay or skip Parkinson's medication.
Even short delays can cause serious complications.

PHARMACY

Pharmacy Name: _____

Phone: _____

Address: _____

DOCTORS & CARE TEAM

Neurologist / Movement Disorder Specialist

Name: _____

Clinic / Hospital: _____

Phone: _____

Email (optional): _____

Primary Care Physician

Name: _____

Phone: _____

Clinic: _____

Other Specialists (if any)

Specialist: _____ Phone: _____

Specialist: _____ Phone: _____

Specialist: _____ Phone: _____

MEDICAL DEVICES

☐ Deep Brain Stimulator (DBS)

Device Card Location: _____

☐ Other Device: _____

Notes: _____

IN CASE OF EMERGENCY

Preferred Hospital: _____

Preferred ER (if known): _____

Notes for Medical Staff:

PARKINSON'S OVERVIEW

Typical OFF Symptoms:

Known Triggers (if any):

Symptoms / Issues (check all that apply):

☐ Dyskinesia

☐ Freezing

☐ Tremor

☐ Rigidity

☐ Balance Issues

☐ Fall Risk

☐ Swallowing Issues

☐ Orthostatic Hypotension

Other Notes:

INSURANCE INFORMATION

Insurance Provider: _____

Policy Number: _____

Group Number (if any): _____

Customer Service / Emergency Number: _____

ADVANCE DIRECTIVES

Healthcare Proxy (Name): _____

Relationship: _____

Phone: _____

Living Will / Advance Directive: ☐ Yes ☐ No

Location / Notes: _____

Power of Attorney: ☐ Yes ☐ No

Location / Notes: _____

ADDITIONAL NOTES

PART 7

TRAVEL CHECKLIST

— PARKINSON'S

USE THIS AS YOUR **PRE-TRAVEL AND IN-TRANSIT** SYSTEM.



MEDICAL PREPARATION

- ☐ Spoke to neurologist before travel
- ☐ Medical letter (diagnosis + medication list) — in destination language
- ☐ Medication list printed + digital backup
- ☐ Emergency contacts documented

BE PREPARED.
TRAVEL CONFIDENTLY.



MEDICATION SAFETY (CRITICAL)

- ☐ All medication in hand luggage only
- ☐ At least 1 week extra supply
- ☐ Original packaging (important for customs)
- ☐ Alarm / reminder system for doses

NEVER RELY ON
CHECKED LUGGAGE.



LEGAL & COUNTRY REQUIREMENTS

- ☐ Checked medication regulations
- ☐ Verified if any medication requires permits
- ☐ Contacted embassy or travel clinic if unsure

RULES DIFFER.
CHECK EARLY.



TIME ZONES & MEDICATION TIMING

- ☐ Adjusted medication schedule in advance
- ☐ Plan written down (not improvised)
- ☐ Alarms set for new time zone

THIS IS ONE OF THE
BIGGEST FAILURE POINTS
IF UNPLANNED.



TRAVEL INSURANCE

- ☐ Covers pre-existing conditions (Parkinson's)
- ☐ Covers medication-related issues
- ☐ Emergency care included

PEACE OF MIND
IS ESSENTIAL.



HEAT & CLIMATE AWARENESS

- ☐ Checked climate at destination
- ☐ Plan for hydration (daily target)
- ☐ Avoid peak heat (11am–3pm)
- ☐ Cooling strategy (AC, shade, clothing)

HEAT CAN
SIGNIFICANTLY
WORSEN SYMPTOMS.



AIRPORT & TRANSIT SUPPORT

- ☐ Assistance requested (wheelchair / priority boarding)
- ☐ Boarding planned early (stress, time)
- ☐ DBS card (if applicable) in hand luggage

PLAN AHEAD.
REDUCE STRESS.



FLIGHT SETUP

- ☐ Aisle seat booked
- ☐ Compression socks (long flights)
- ☐ Movement plan (stand/walk every 1–2 hours)
- ☐ Easy-access medication during flight

COMFORT TODAY.
BETTER TOMORROW.



MOBILITY & ENERGY MANAGEMENT

- ☐ Planned rest periods into itinerary
- ☐ Avoided overpacking schedule
- ☐ Identified "low-energy backup days"

SAVE ENERGY FOR
WHAT MATTERS
MOST.



ON-THE-GROUND AWARENESS

- ☐ Pharmacy or medical care nearby identified
- ☐ Hotel accessibility checked (elevator, distance)
- ☐ Transport options pre-planned

KNOW BEFORE YOU GO.
FEEL SECURE WHEN
YOU ARRIVE.

KILL PARKINSON · killparkinson.org

Parkinson's
Emergency &
Travel Pass

Print · Laminates · Carry Always

IMPORTANT

Show this card to any doctor, paramedic, or hospital staff. Your medication timing is critical.

This pass contains:

- Personal & emergency contacts
- Complete medication list
- Doctor contacts & insurance
- Symptoms for first responders

PARKINSON'S
EMERGENCY &
TRAVEL PASS

NAME

DATE OF BIRTH

BLOOD TYPE

DIAGNOSIS YEAR

FOR FIRST RESPONDERS

I have Parkinson's disease. My movements, speech or facial expression may appear unusual. This is my condition — not intoxication.

EMERGENCY CONTACT

NAME & RELATIONSHIP

PHONE

killparkinson.org

Keep this card in your wallet at all times.

MY INFORMATION

Personal & Medical Details

PERSONAL DETAILS

FULL NAME

DATE OF BIRTH

BLOOD TYPE

ADDRESS

PHONE

ALLERGIES (MEDICATIONS, FOOD, OTHER)

OTHER CONDITIONS

MY DOCTORS

MOVEMENT DISORDER SPECIALIST

PRACTICE / HOSPITAL PHONE

GP / PRIMARY CARE PHYSICIAN

PRACTICE PHONE

INSURANCE & TRAVEL

HEALTH INSURANCE PROVIDER & NUMBER

EUROPEAN HEALTH CARD NO.

VALID UNTIL

TRAVEL INSURANCE PROVIDER & POLICY NO.

killparkinson.org · Free printable version available online

Must Be Given ON TIME

CRITICAL — FOR HOSPITAL STAFF

Parkinson's medication MUST be given on time. Delays of 30+ min can cause severe complications. Do NOT withhold medication without neurologist approval.

DBS DEVICE

I have / do not have a Deep Brain Stimulator (DBS).

If YES: No MRI without prior neurosurgery clearance

MEDICATION

DOSE

TIMES

NOTES

MEDICATION LIST

SYMPTOMS THAT MAY BE MISUNDERSTOOD

Freezing of gait

Sudden inability to move feet — not a fall risk behavior

Dysarthria

Slurred/quiet speech — I understand you fully

Hypomimia

Reduced facial expression — does not reflect mood

Dysphagia

Swallowing difficulties — adjust food/medication form

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PART 8



NOTES

CAPTURE. CLARIFY. MOVE FORWARD.

DATE: _____

DAY: _____

WEEK: _____

NOTES & THOUGHTS

WHAT STOOD OUT TODAY?

ANY SYMPTOM CHANGES?

ANYTHING UNUSUAL?

POSSIBLE TRIGGERS

(STRESS, SLEEP, FOOD, ETC.)

WHAT HELPED?

FOR MY DOCTOR

QUESTIONS / THINGS TO MENTION

FOLLOW-UP / ACTIONS

WHAT I WANT TO TRY OR CHANGE



SMALL DETAILS MATTER.

PATTERNS START HERE.

