FOR PATIENTS & CARE PARTNERS

Medication Scheduling

A practical guide to taking Parkinson's medicines safely and on time

THE MAIN IDEA

Parkinson's medication schedules are individualized and often time-critical. Take each medicine at the exact times prescribed—not simply at standard breakfast, lunch and dinner medication rounds. Never change the dose, timing or formulation without the prescriber or pharmacist.

Why timing matters

Many Parkinson's medicines are used to maintain steadier symptom control across the day. A late or missed dose may allow stiffness, tremor, freezing, anxiety, swallowing difficulty or other symptoms to return. Some people also experience predictable "wearing off" before the next dose.

- **Use clock times.** Write 7:00 a.m., 11:00 a.m. and 3:00 p.m.—not "three times daily"—when the prescriber has supplied exact times.
- **Keep the formulation exact.** Immediate-release, controlled-release, extended-release, dissolvable, inhaled and infusion products are not interchangeable.
- **Track what happens between doses.** Record when a dose begins working, when symptoms return and whether involuntary movement, sleepiness, nausea, dizziness, confusion or hallucinations occur.

MEDICATION SAFETY

Do not crush, split, dissolve or open a tablet or capsule unless the pharmacist confirms that the specific product can be altered. Extended-release products often must be swallowed intact.

Build a schedule that works

1. **Start with one verified list:** Copy the pharmacy label exactly: medicine name, strength, formulation, dose, clock time, reason and special instructions.
2. **Anchor doses to the clock:** Set alarms for every time-critical dose. Add a second reminder 10–15 minutes later if the first is easy to dismiss.
3. **Choose one organizer:** Use a weekly pill box only after a pharmacist confirms which medicines may be removed from original packaging. Consider a locked or automatic dispenser when cognition is changing.
4. **Link refills to the schedule:** Request refills several days early and keep pharmacy, prescriber and insurance information together. Do not use an expired or substituted product without confirmation.
5. **Record each dose:** Check off the dose immediately after it is taken. A shared paper log or app helps prevent missed or duplicate dosing.
6. **Review after every change:** Replace old schedules, update phone alarms and share the new version with all caregivers, clinicians and facilities.

Food, protein and levodopa

Some people notice that carbidopa-levodopa works more slowly or less effectively when taken with a protein-rich meal. Others need food to reduce nausea. The right plan is individual and should protect both symptom control and adequate nutrition.

- **Ask the prescriber or pharmacist** whether the specific levodopa product should be taken with food and how to handle nausea.
- **If food interferes,** the care team may recommend taking levodopa about 30–60 minutes before or roughly 60 minutes after a meal. Follow the instructions given for that person.
- **Do not reduce protein on your own.** A dietitian familiar with Parkinson's can help adjust protein timing while maintaining calories, strength and nutrition.

Printable daily medication schedule

Patient: _____ Date started: _____ Prescriber: _____

Use an additional copy if more rows are needed. Bring completed pages to medical and pharmacy visits.

Time	Medication	Dose	With food?	Special instructions	Taken
_____	_____	_____	_____	_____	☐
_____	_____	_____	_____	_____	☐
_____	_____	_____	_____	_____	☐
_____	_____	_____	_____	_____	☐
_____	_____	_____	_____	_____	☐
_____	_____	_____	_____	_____	☐

Quick symptom and timing notes

Time	Dose taken	Before dose	When it worked	When symptoms returned
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Missed, late or uncertain doses

- **Follow the medicine-specific instructions.** Different Parkinson's medicines and formulations have different missed-dose rules. Check the label or written plan, then call the pharmacist or prescriber if uncertain.
- **Do not double a dose** or take an extra dose to "catch up" unless a qualified clinician specifically instructs you to do so.
- **If you cannot remember whether a dose was taken,** check the log, organizer or dispenser before taking more. Call the pharmacist for real-time guidance.
- **Seek urgent advice after repeated missed doses,** especially if the person develops severe stiffness, inability to move, fever, marked confusion, swallowing trouble or a rapid decline.

Travel, hospital and care-facility planning

- **Carry medicines in labeled containers** in hand luggage, with extra supply for delays and a written clock-time schedule.
- **Use the destination time zone plan** provided by the pharmacist or prescriber when travel crosses time zones. Do not improvise dose spacing.
- **At admission, say: "These are time-critical Parkinson's medicines."** Provide the home schedule, formulation and neurologist contact. Ask that the exact times be entered into the medication administration record.
- **Report swallowing changes immediately.** Ask the Parkinson's team and pharmacist for an appropriate formulation; do not crush medicine without confirmation.

CALL 911

For loss of consciousness, severe breathing difficulty, signs of stroke, a seizure, a serious allergic reaction, or any immediate life-threatening emergency.

Trusted resources

- **Parkinson's Foundation — Managing Off Time:** https://www.parkinson.org/library/fact-sheets/managing-off-time
- **Parkinson's Foundation — Levodopa:** https://www.parkinson.org/living-with-parkinsons/treatment/prescription-medications/levodopa
- **VA PADRECC:** https://www.parkinsons.va.gov/
- **Parkinson's Foundation Helpline:** 1-800-4PD-INFO (1-800-473-4636)

Recovery Health Tech contact: Val Brown • 1-504-450-6279 • val@recoveryhealthtech.com