

# Daily Routine



Complete this worksheet so that anyone who fills in for you as caregiver will know how to care for the person with Parkinson's.

Usually arises at: \_\_\_\_\_

Usually goes to bed at: \_\_\_\_\_

**It is very important that Parkinson's medications are given on time every time, according to schedule.**

*See the Medications Worksheet for more information.*

**Are there allergies to any foods or substances?**

---

---

**Are there dietary restrictions or food/beverage consistencies needed?  
Favorite foods/dislikes?**

---

---

**Are any special adaptations used for eating, dressing or personal cares?**

---

---

**Hobbies and interests:**

---

---

FILLED OUT BY:

DATE:

.....

**What is the typical daily routine?** Include mealtime, activities, rest periods, exercise, personal cares and other activities.

---

---

---

---

---

---

---

---

**Additional information:**

---

---

---

---

---

---

---

---

---

---

---

---