



MEDICAL ALERT CARDS

CurePSP’s medical alert wallet cards help convey contact information and important information about the PSP, CBD or MSA diagnosis and contraindicated medications, which can be used in emergency situations.

After printing, please cut off the bottom half of the document with the card. Then, fold it across the vertical gray line and then again across horizontal red dotted line in order for it to be wallet-sized.



I have a rare brain disease called
multiple system atrophy (MSA)
which could make it more difficult for me to
coordinate, walk, swallow, speak, breathe, urinate
and control blood pressure.
You may need to contact my family and/or provider for help.

MEDICAL ALERT

My name	Date of birth
Home address	Phone number
Emergency contact name	Relationship
Primary care doctor name	Phone number
Neurologist name	Phone number
Allergies/Other medical conditions	

Important information for providers caring for MSA

- Do not abruptly reduce or increase dosage of levodopa or amantadine.
- Avoid:
 - › Dopamine agonists – Can cause dystonia
 - › Alpha-blockers for bladder dysfunction and beta blockers for anything – Can cause sudden hypotension
 - › Haloperidol, olanzapine, aripiprazole and risperidone – Can dangerously aggravate stiffness and slowness and cause severe sedation
 - › Amitriptyline, bupropion, trihexyphenidyl, oxybutynin, tolterodine, fesoterodine, paroxetine and most tricyclic antidepressants – Can worsen mobility
 - › Diphenhydramine (an antihistamine with anticholinergic effects) – Can worsen mobility
 - › Memantine – Can cause nausea, dizziness and sedation
 - › Metoclopramide and prochlorperazine for nausea/vomiting; instead, use ondansetron, trimethoprimamide or granisetron
- Use with caution:
 - › Pimavanserin, quetiapine and clozapine – Can be used in brief, emergency situations but can cause aggravation of slowness and stiffness
 - › Benzodiazepines (clonazepam, temazepam) and benzodiazepine receptor agonists (zolpidem, eszopiclone) – Can increase risk of falls but can be used if person is chairbound and hypotension is not a risk
- Monitor closely for falls risk, delirium, swallowing or breathing difficulty, urinary tract infections, hypotension and other complications.
- It is helpful if a neurologist (preferably my neurologist) and a rehabilitation therapist are consulted for my care.