

Patient: **John Doe**  
Date of Birth: **25 Aug 1972**  
Record Number: --  
Physician: **Parkinsons Clinician**  
Clinic: **PKG Clinic**  
Session Duration: **7 Days**  
Session Start: **Mar 01, 2018**  
Reason for PKG: **Evaluation of motor fluctuations**

Medication: **levodopa/carbidopa IR 25/100x 2 tabs each reminder**  
Deep Brain Stimulation: **No**  
Infusion Therapy: **None**



## PKG Scores Longitudinal View

	Feb 15, 2022	Feb 22, 2022	Mar 01, 2022	Target Range <sup>1</sup> / Interpretation
Median Dyskinesia Score (DKS)	20.1	18.3	15.8	≤ 9.0
Median Bradykinesia Score (BKS)	9.0	12.2	15.9	≤ 25.0
Fluctuation Dyskinesia Score (FDS)	35.5	26.7	20.3	7.5 - 13.0
% Time Tremor (PTT)	4.1%	5.4%	6.8%	No Tremor 0 - 0.5% Inconclusive 0.6% - 1% Tremor present >1%
% Time Immobile (PTI)	1.3%	2.2%	2.8%	Not clinically significant < 5% Suggestive of EDS >10%
# Medication Acknowledged/Reminders	49/49	49/49	49/49	-

<sup>1</sup> Please refer to [pkgcare.com/targets](http://pkgcare.com/targets) for the consensus targets used for this report in each country.

## Findings Summary

### Factors Limiting Interpretation

No limiting Factors

### PKG Scores Longitudinal View

DKS remains out of target; BKS remains in target; FDS remains above target range; PTT suggests tremor remains present; PTI remains insignificant; Medication compliance is consistently good.

### DKS + BKS Weekly Summary

Data suggests evidence of peak-dose dyskinesia during each medication interval. BKS appears to fluctuate in and out of target in response to doses, with improvement in BKS following medication reminder events and evidence of wearing off is noted during each dose cycle during the waking day.

### Tremor Summary

Data suggests tremor is intermittently present, with a tendency to cluster around reminder times, supportive of wearing-off at these times.

### Immobility and Inactivity Summary

Patient arises at ~0700 on most days. Episodes of immobility /inactivity appear most predominantly around medication reminder times. Overall PTI score is not elevated.

### Peridose Curves

Compliance to medication reminders is good. The peridose response curves are comparable to the summary plot.

### Daily Plots

No outstanding features.

DISCLAIMER: The PKG Report is not intended to replace clinical decision making and should be viewed in the full context of the patient's clinical state. Patients need to interpret the information contained in this PKG report with the assistance of their healthcare professional. Patients should not alter the medication reminders without prior consultation of their healthcare professional. Please refer to [pkgcare.com/indications](http://pkgcare.com/indications) for PKG Indications for Use by country.

Patient: **John Doe**

Medication: **levodopa/carbidopa IR 25/100x 2 tabs each reminder**

Reference Period  
09:00-18:00

Record Number: --

Target range

Deep Brain Stimulation: **No**

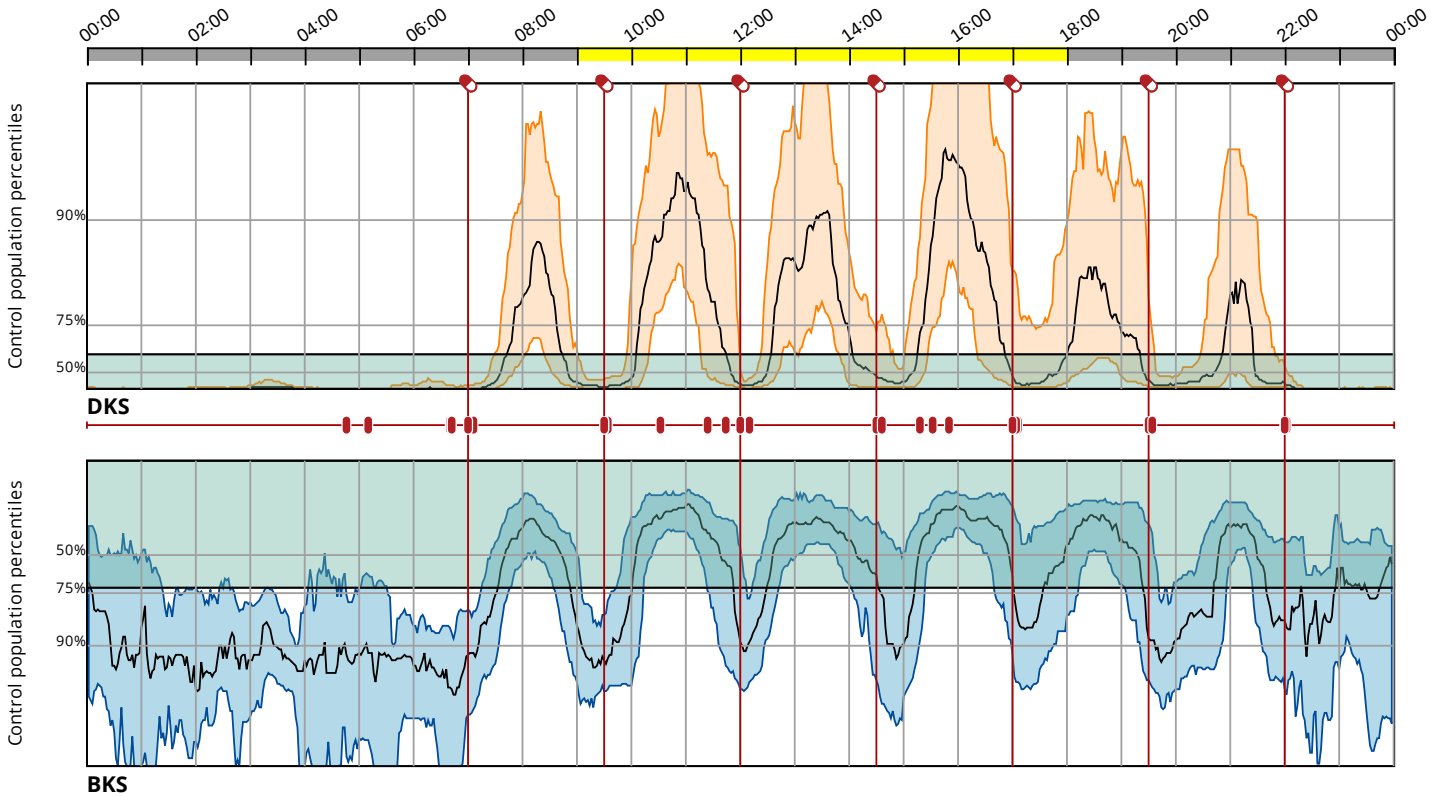
Medication  
Reminder

Infusion Therapy: **None**

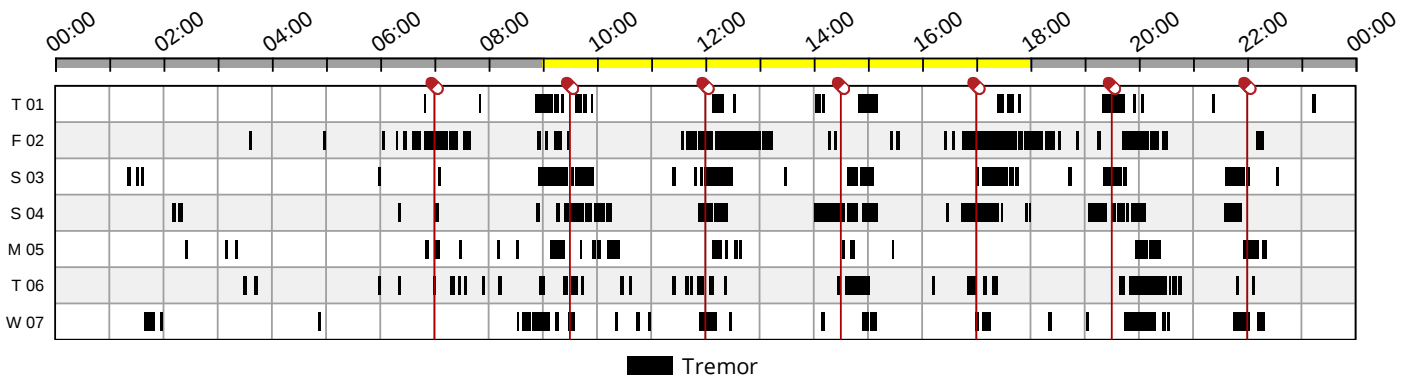
Reminder  
Acknowledged

Reason for PKG: **Evaluation of motor fluctuations**

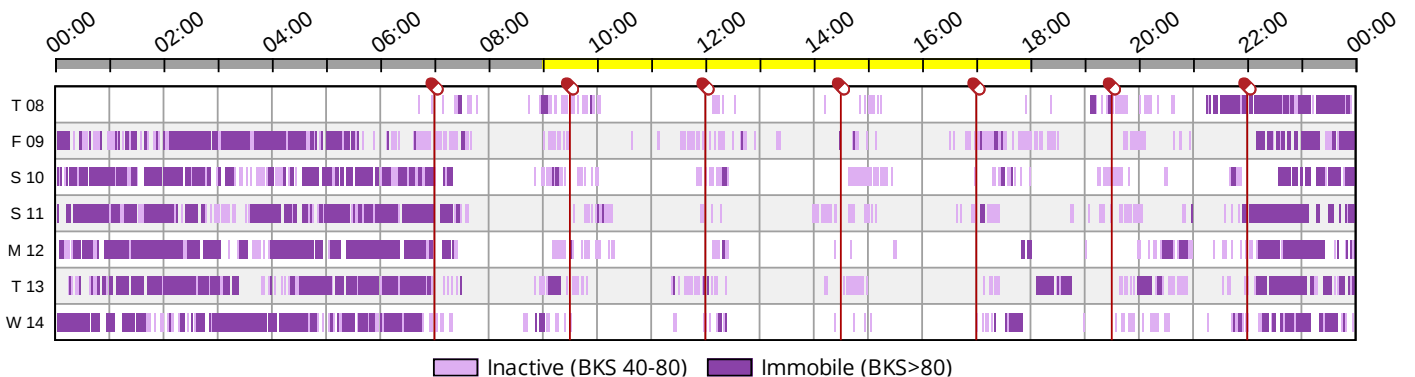
### DKS + BKS Weekly Summary



### Tremor Summary



### Immobility and Inactivity Summary

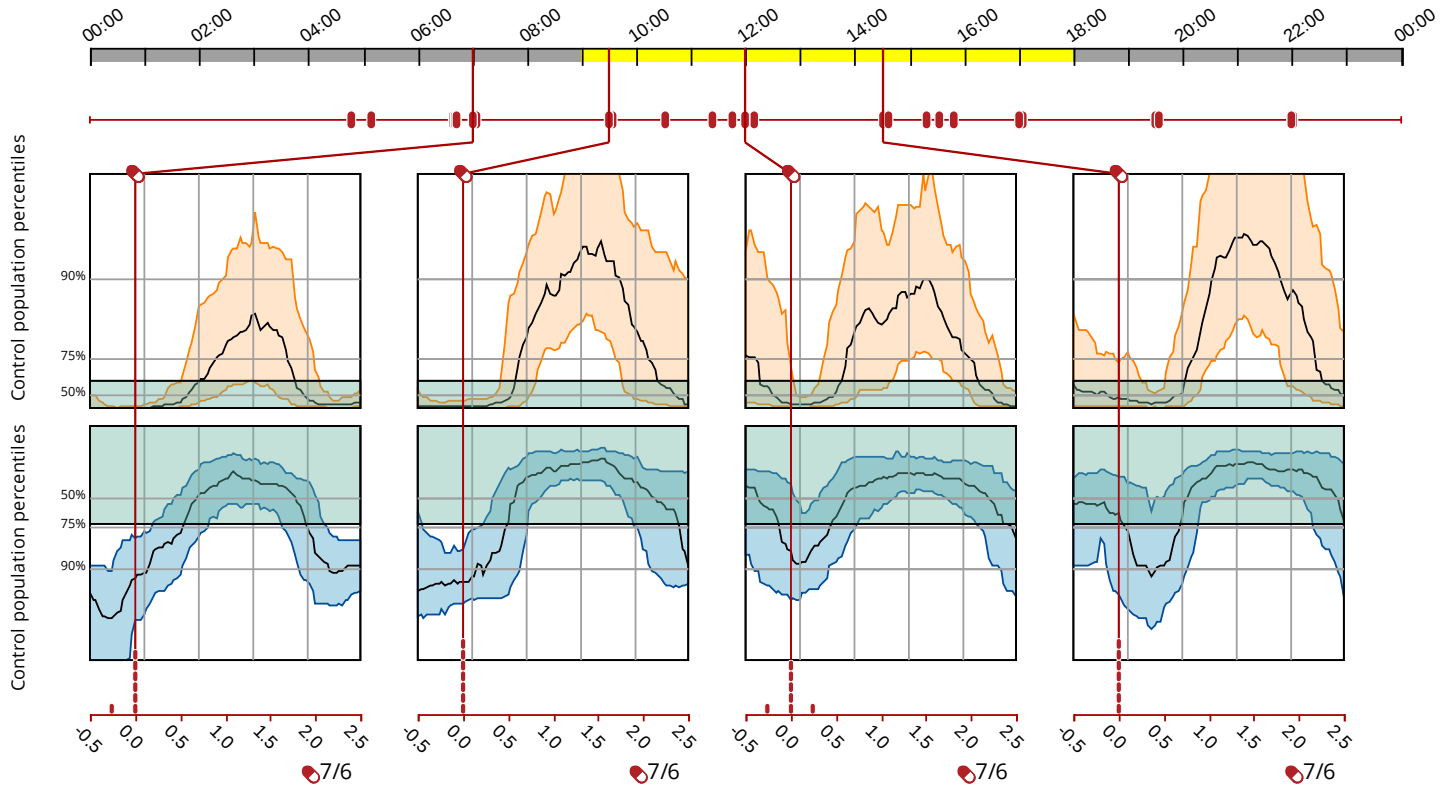


Patient: **John Doe**  
Record Number: --  
Deep Brain Stimulation: **No**  
Infusion Therapy: **None**  
Reason for PKG: --

Medication: --

- Reference Period 09:00-18:00
- Target range
- Medication Reminder
- Reminder Acknowledged

### Peridose Curves

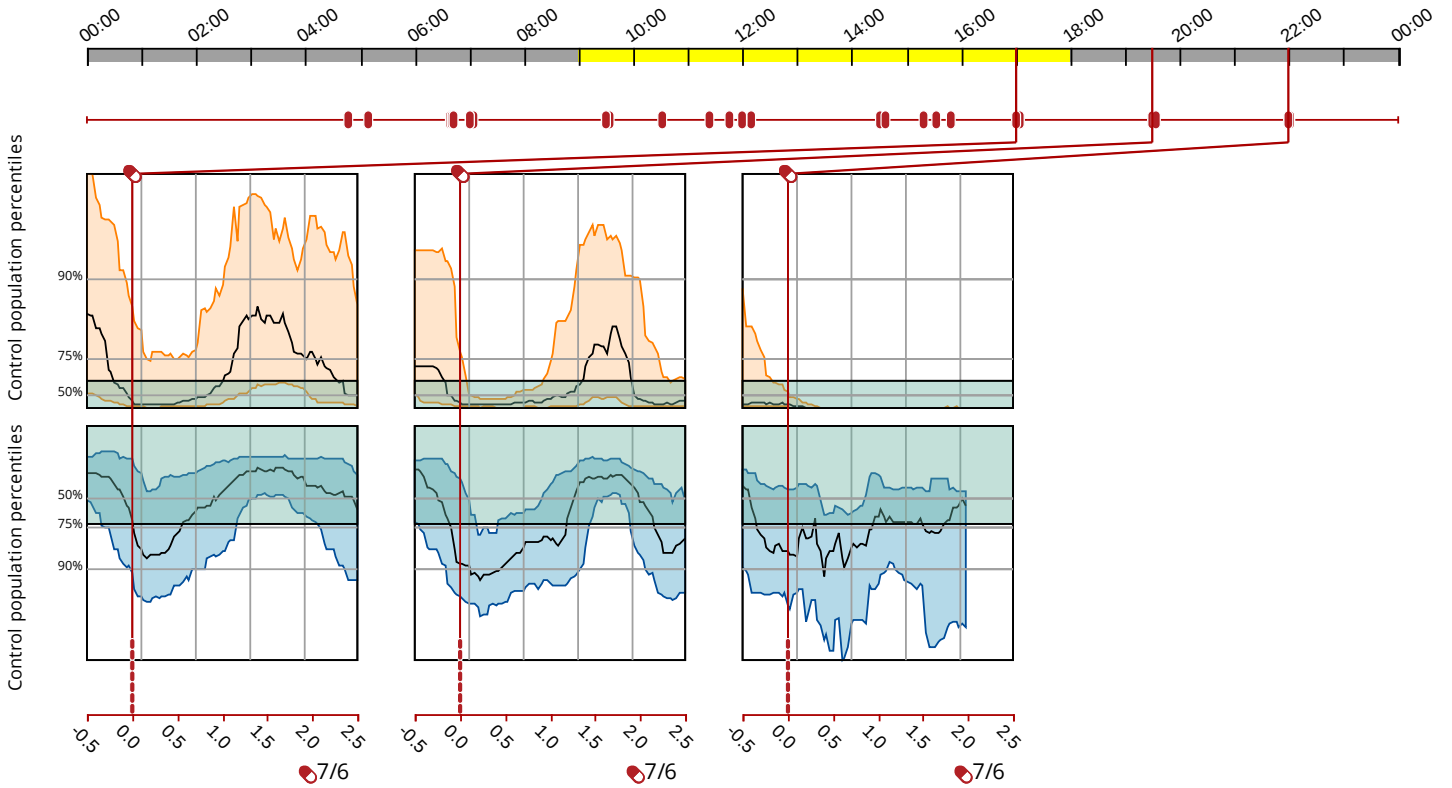


Patient: **John Doe**  
Record Number: --  
Deep Brain Stimulation: **No**  
Infusion Therapy: **None**  
Reason for PKG: --

Medication: --

- Reference Period  
09:00-18:00
- Target range
- Medication  
Reminder
- Reminder  
Acknowledged

### Peridose Curves



Patient: **John Doe**

Medication: **levodopa/carbidopa IR 25/100x 2 tabs each reminder**

○ Medication  
Reminder  
● Reminder  
Acknowledged

Record Number: --

Deep Brain Stimulation: **No**

Infusion Therapy: **None**

Reason for PKG: **Evaluation of motor fluctuations**

### Daily Plots

