Voorzijde:



**ALERT CARD: DUCHENNE MUSCULAR DYSTROPHY**

**Name: Date of birth:**

**In case of an emergency please contact:**

* **Mom/Dad:**
* **Belgian Neuromuscular team:**
* **Doctor:**

**Medication: takes corticosteroids (Deflazacort = Calcort) Dose = mg/day**

* **If vomiting and/or unable to take daily corticoids for 24 hours:**

Request substitute IV corticoids

6mg Deflazacort equals 5mg Prednisone

**Labs: High liver enzymes (AST/ALT) are normal for people with Duchenne**

Achterzijde:



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**Anaesthetic precautions:**

* Avoid inhaled **succinyl clodine** anaesthesia! IV anaesthesia is considered to be safe (close monitoring)
* Local anaesthetics & Nitrous Oxide are safe for minor dental procedures

**Leg fracture:**

* If ambulatory: internal fixation/surgery rather than casting
* Rapid onset, shortness of breath/difficulty breathing, changes in alertness (confusion, agitation,

disorientation) after fall or leg injury 🡺 consider Fat Embolism Syndrome (FES)

**Respiratory care:**

* Don’t give oxygen without close monitoring of CO2 levels (possible CO2 retention)
* Breathing may need to be supported (with BiPAP, for example)
* If oxygen levels are low, assisted coughing (with cough assist machine/Ambu bag) may help
* Take all equipment with you to emergency room and alert your neuromuscular team