

# PARTICIPATE IN OUR TOUCHSCREEN VISUAL WORKING MEMORY STUDY

@ COGNITIVE NEUROPHYSIOLOGY LAB &  
NEUROLOGY MOVEMENT DISORDERS CLINIC

## SUBJECTS MUST BE:

- AT LEAST **18 YEARS OLD**
- DIAGNOSED WITH **PARKINSON'S DISEASE (PD)**
- OPTIMIZED **DEEP BRAIN STIMULATION (DBS) SETTINGS**, BASED ON THE OPINION OF THE REFERRING PROVIDER
- ON A STABLE DOSE OF CARBIDOPA-LEVODOPA, BASED ON THE OPINION OF THE REFERRING PROVIDER
- **NOT** DIAGNOSED WITH ANOTHER NEUROLOGICAL OR NEURODEVELOPMENTAL DISORDER OR HIV
- UNDER **NO** INFLUENCE OF ALCOHOL OR ILLEGAL DRUGS
- **NORMAL** OR CORRECTED TO NORMAL **VISION**

## STUDY AIM:

- TO FIND SPECIFIC BRAIN SIGNALS ASSOCIATED WITH TOUCHSCREEN VISUAL WORKING MEMORY TASK
- TO DETERMINE AND DIFFERENTIATE THE IMPACT OF DBS THERAPY ON VISUAL WORKING MEMORY AND ASSOCIATED BRAIN ACTIVITY IN PARTICIPANTS WITH PD

## PROCEDURE:

- THE STUDY WILL INVOLVE **TWO VISITS** TO OUR SITE
- YOU WILL BE ASSESSED IN THE **DBS ON/OFF** STATES
- WE MEASURE YOUR **BRAIN ACTIVITY** USING EEG (ELECTROENCEPHALOGRAPHY) AND SIMULTANEOUSLY MONITOR YOUR **ARM MOVEMENTS** WITH MOTION CAPTURE AND **EYE MOVEMENTS** WITH EYE-TRACKER WHILE COMPLETING THE TOUCHSCREEN VISUAL WORKING MEMORY TASK SEATED
- YOU WILL BE COMPLETING A SET OF SHORT QUESTIONNAIRES AND COGNITIVE TESTS

## PAY:

- **\$18 PER HOUR** (IN CASH) FOR THE TIME SPENT IN THE LAB
- TOTAL TIME SPENT IN THE LAB WILL **NOT EXCEED 5 HOURS**

## IF YOU WOULD LIKE TO PARTICIPATE AND/OR LEARN MORE ABOUT THE STUDY, PLEASE:

- **SCAN THE QR CODE** TO EMAIL US DIRECTLY, OR



- **EMAIL US AT:**

**Hannah\_Mesmer@URMC.Rochester.edu**