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Personal Wants: Doctors and Dialogue

No matter what you do for a living, no matter how confident you are, when you're the patient, the sight of a doctor with a stethoscope can make you nervous and often speechless. (And we won't even mention the attractive paper gown you might be wearing!) Learning what you can do to improve communications with your providers is critical to improving your personal health care system.

A Guide to Communicating Better with Your Providers

As you'll probably agree, you may not have enough time with your health care providers to really fill them in on all of your health care concerns and issues in one visit. Even if you have a great relationship with a doctor, you can't guarantee that he or she will be available when you have an unexpected problem. Until your health care

records can be electronically stored and transferred among your providers, it's up to you to provide your complete health care information by creating and updating your own records on a regular basis.

Your health care records are made up of your protected health information, or PHI. Recording your PHI doesn't mean carrying around an inefficient clipboard with every paper generated by every provider you see. Instead, it's a road map of your protected health information that should contain answers to the questions outlined in this chapter's headings.

Who Are Your Health Care Providers?

According to the 1999 Patient's Bill of Rights, each patient has a right to have his or her personal physician notified upon admission to a hospital. Although patients have rights, they also have responsibilities. We like to think that our providers are miracle workers, but it's up to us to help them perform these "miracles" by providing our vital information in the form of our personal health care systems. (See Chapter 1, "Health and Medical Wants: Your Personal Health Care System.") Make sure your list includes what you're seeing each doctor for, even if you don't think a certain doctor is relevant to your current problem. Every doctor can tell you that he or she has been called to consult on a patient, only to find that the patient has already been seeing another physician for that particular problem. Talk about a waste of time, money, and opportunity!

Where Were Your Last Tests Done?

Keep a list of the tests you have had, where the tests were taken, and the results (if you know) as part of your PHI Record. Unfortunately, the tendency is to block out negative experiences, which include health care testing. MRIs, CT scans, and biopsies aren't a lot of fun, so it's no wonder we try to forget. But your providers need this information. Without it, your health care delivery can be impaired or time

and money wasted with retesting. It's remarkable just how much time and money is wasted because patients can't remember what they had done and where. Be courteous to your physician and kind to yourself. Write down the test information, and bring it with you!

What Medicines Are You Taking?

Telling a physician that you're taking "that little white pill," "a blood pressure pill," "a water pill," or "a sugar pill" really isn't helpful. Sadly, we can recite ballgame statistics and what's on TV tonight but not what we're putting in our bodies each day. If your doctor didn't prescribe it, he or she may not know that you're taking it. And even if your provider prescribed a particular drug, copies of prescriptions get lost.

Here's a real-world example. You go to Doctor A, who puts you on three medications. Doctor B takes you off one and puts you on two more. Doctor C adds another new prescription. Which physician knows what you are taking? The answer is none. Just because you have a prescription doesn't mean you're actually taking the prescribed medicine! More than a few patients overdose on medications by thinking two different bottles are different drugs. Who but a health care professional would really know that Lasix is the same thing as Furosemide? Both refer to the same compound. Take too much, and you may become dehydrated, which could lead to life-threatening kidney failure. Take too little, and your doctor may over-prescribe for you the next time. If only you'd told your doctors and pharmacist everything.

Make sure you mention all natural remedies and alternative medicines you're taking, too. We can't emphasize enough the importance of telling your health care providers about every pill you pop. Remember that aspirin, antacid, and acetaminophen are medications, too. Most people don't take this "full disclosure" seriously. Physicians are constantly frustrated by patients' failures to tell them about all medications, both prescription and over-the-counter. Even

the countless patients who wind up hospitalized as a result don't get the message. Do you really have to tell your doctor everything? Only if you want the best medical care possible.

What Exactly Is This Pill?

If you forget to ask your doctor specific information about a prescription, ask your pharmacist for the name of the medication, the dose, and how often and for what length of time you should take it, advises Tracy A. Benson, Pharm D. Then add the information to your medication list. Dr. Benson also says you should “review any medication warning labels the pharmacist has affixed to the container; if any information on the prescription container seems incorrect or is unclear, ask for clarification while you're still at the pharmacy or as soon as you receive your prescription.” Use only one pharmacy so that your pharmacist can screen for medicines that could potentially interact with one another and cause adverse effects. The Institute for Safe Medication Practices (www.ismp.org) is a helpful resource as well. Another idea: Bring all of your prescriptions with you to each doctor's appointment. Ask a nurse to help you read the labels and create a list of your prescriptions.

What Are You Allergic To? What Are You Intolerant Of?

Allergies and intolerances are two different things, so choose your words carefully when speaking with your health care providers. Just casually saying, “I'm allergic” to a drug or compound when you're not could deny you important treatments. If you are, in fact, allergic to a particular substance, be sure your health care providers know and it's recorded correctly. Review what's in your chart regarding allergies and intolerances, and make sure the following distinctions are made:

- **Serious medication or substance allergy**—Only those substances or drugs that make our faces, tongues, and throats swell, cause shortness of breath, or result in a severe whole-body rash should be listed under this heading. These conditions are called

anaphylactic reactions and are very dangerous. A person's blood pressure can drop, or his or her airway may become compromised to the point that brain damage or death can occur. We've all heard of people dying from a bee sting or a peanut allergy. It can also happen with some prescribed drugs or substances.

- **Mild allergic reactions**—These allergies, which are characterized by mild rashes or itching, may occur with any substance or medication. These are much more common than serious allergies.
- **Nontolerance**—Often people refer to this as an allergy, but it really isn't. An example is stomach upset from a particular medication. You should be sure to include any intolerances as part of your PHI.

Do I Have to Tell My Doctor Everything?

Yes! Because when it comes to your health, knowledge is critical. Your provider won't judge you if you smoked marijuana every day in high school. And your doctor won't stop seeing you if you report alcohol, tobacco, or drug abuse. Let your physician decide that the bunion removal surgery that you had last year is unimportant. If you were given malaria pills during your African safari last year, your provider needs to know. Unless you're a trained medical professional, the decision as to what's important and what isn't should be made by your doctor, not you.

How Are You Feeling?

Fill your provider in on each ache, pain, bump, lump, and everything else that's troubling you. Start with the reason you're visiting and your chief complaints. Tell your doctor why you're there—he or she won't necessarily know unless you make the purpose of your appointment clear. Not only that, but sometimes physicians forget all the reasons

they're seeing you. A friendly reminder when you first see a doctor is never out of line: "As you may recall, doctor, when we met last we discussed A and B and were waiting for the results of tests C and D. E is what's happening to me now. What have you found out?" Next, tell your physician every other symptom. Those details matter.

What's Your Health History?

Your physician needs to hear it all—from your broken leg to your bout with chicken pox to your chronic cough. It's not up to you to decide what's important. If you've seen this doctor before, review your chart to make sure all of your information has been recorded correctly. Information to be included as part of your health history is listed next.

A Guide to Your Protected Health Information

We're telling you all this to improve the way you communicate with your caregivers. We want you to realize that this is the way your physicians are thinking about you. Divide your health care information and your answers to the preceding questions into the areas of past medical history, medications/allergies, family history, and social history.

Past Medical History

- Cardiovascular history—List history of all heart and blood vessel conditions, including hypertension.
- Oncology history—List all cancer diagnoses and treatments.
- Neurologic history—List all brain, spine, and other nervous system conditions.

- Endocrine history—List diabetes, thyroid conditions, and related conditions.
- Obstetric and gynecologic history (if female)—List all pregnancies and deliveries, gynecologic testing history (mammograms and pap smears, for example), and treatments.
- Ophthalmologic history—List all eye conditions and treatments.
- ENT history—List all ear, nose, and throat conditions and treatments.
- Pulmonary history—List all lung conditions and treatments.
- GI history—List all esophageal, stomach, liver, and small and large intestine conditions and treatments.
- Hematology history—List all bone marrow, blood, and spleen conditions and treatments.
- Dermatology history—List all skin conditions and treatments.
- Orthopedic and rheumatologic history—List all bone and joint conditions and treatments.
- Renal and urologic history—List all kidney, bladder, and, if male, testicular and prostate, conditions and treatments.
- Psychiatric history—List all psychological conditions and treatments.
- Infectious disease history—List all infections with organism types and treatments.

Medications/Allergies

- Prescribed and over-the-counter drugs
- Severe allergies/mild allergies/intolerances

Family History

- Family illnesses
- Deaths and causes of death of family members

Social History

- Where you work and what you do
- Smoking history
- Recreational drug use history
- Alcohol use
- Eating and sleeping habits
- Exercise habits
- Marital status

Your social history—your occupation, your habits (good and bad), and your support system—is important to your health care provider because it may be an indicator of certain diseases, your risk of certain ailments, and your general well-being.

Take notes, create lists, and write down important things. Now that you know what your health care provider is looking for, come to every appointment prepared. The fewer questions your doctor has to ask you, the more time you have for your questions.

You don't want to miss an opportunity to get answers from your physician, so make a list of questions and bring it to each appointment. If you're worried you'll still forget something, bring a friend or family member with you to prompt you if needed. Take detailed notes in case you have questions later.

Personal Wants

- Improve communications with your providers.
- Prepare your protected health information.